

# 医疗服务提供者名录



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

**blue**   
california  
Promise Health Plan







Promise Health Plan

## LANGUAGE ASSISTANCE NOTICE

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

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

Հայերեն պիտակ (Armenian) 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: Չանզահարեք 1-855-699-5557 (TTY՝ 711) հեռախոսահամարով: Այդ ծառայություններն անվճար են:

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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# A. 简介

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

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

## 更换 PCP

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

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

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

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


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

**(855) 699-5557**。

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

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

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

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

<a href="http://www.blueshieldca.com/promise">www.blueshieldca.com/promise</a>	
Customer Care	<b>(855) 699-5557 (TTY: 711)</b>
Provider Services	<b>(800) 468-9935</b>
Transportation	<b>(800) 433-2178</b>
Nurse Help Line	<b>(800) 609-4166</b>
Behavioral Health	<b>(855) 321-2211 (TTY: 711)</b>
<small>This member has limited benefits outside of the plan service area and outside of California. Promise: This card is for identification purposes only. It does not prove eligibility for services. Please contact your plan administrator (either through Blue Shield of California Promise Health Plan or provider) for more information. Please call 1-800-433-2178 for more information and to see how to get help. Call Provider Customer Service for more information and to see how to get help. Blue Shield of California Promise Health Plan is a fully self-funded health plan provided to eligible members by contracted and non-contracted providers. If the member is covered by a self-funded health plan, please provide the name and address of Blue Shield of California Promise Health Plan as soon as possible. Non-Emergency services rendered only after medical screening, transportation and other services required to stabilize the condition require pre-authorization approval. Blue Shield of California Promise Health Plan is an independent licensee of the Blue Shield Association.</small>	

Blue Shield 身份卡 (BIC)

## 通过 Medi-Cal Rx 提供药房服务

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

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



## 如何使用该名单

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

## 有关名录列表的重要信息

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

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

## 其他重要信息和重要披露

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

请致电 Blue Shield Promise 客户关怀部：**(855) 699-5557** 确认您能获得的所需医疗保健服务。

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

供者搜索工具进行查询，网址：  
[blueshieldca.com/promise](https://blueshieldca.com/promise)。

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

## 翻译服务

为便利您，Blue Shield Promise 提供：

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

您只需致电您的医疗团队或 Blue Shield Promise 客户关怀部。对于预定的会面，请确保在预约前至少十 (10) 个工作日要求提供口译员。

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



Promise Health Plan

## 非歧视通知

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

Blue Shield of California Promise Health Plan 规定：

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

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

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

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

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

## 如何提出申诉

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

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

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

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

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

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

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

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

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





# Blue Shield Promise 医疗服务提供者网络

## 定义和常规信息

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

**家庭和全科医学：**治疗儿童和成年人的医生。

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

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

**内科：**为 18 岁以上成年男性和女性提供治疗的医生。

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

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

**妇产科：**专门从事妇女健康和生育保健的医生。

**儿科：**治疗 18 岁以下儿童的医生。

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

- 家庭和全科医学
- 内科
- 妇产科
- 儿科

## 服务提供者名录关键信息

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

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

# Promise 名录无障碍设施标识

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

## E = 检查室

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

## EB = 外部建筑

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

## IB = 室内建筑

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

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

## P = 停车场

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

## R = 洗手间

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

## T = 检查台

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

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



## 无障碍代码说明

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

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

# 如何阅读服务提供者列表

以下信息可以帮助您选择主治医生

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

示例：

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

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



## 及时获得护理标准

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预约类型:

必须在以下时间内预约：

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

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



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

**San Diego:**

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





## B. 联邦合资质的健康诊所

### ALPINE

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-445-6200

After Hours Phone:  
619-445-6200

License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:

619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 90000681

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

#### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901-1103

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A158569

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

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

## B. 联邦合资质的健康诊所

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

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: NP95006360

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE

Provider ID: 517802

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

License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No





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

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

## B. 联邦合资质的健康诊所

SA 9:00AM-5:00PM  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.mtnhealth.org](http://www.mtnhealth.org)




### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE


Provider ID: 517802  
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
 License Number: PA52347  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
 MO 9:00AM-5:00PM  
 TU 9:00AM-5:00PM  
 WE 9:00AM-5:00PM  
 TH 9:00AM-5:00PM  
 FR 9:00AM-5:00PM  
 SA 9:00AM-5:00PM

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

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### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE




Provider ID: 517802  
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103  
 Phone: 619-662-4100  
 Fax: 619-205-6305  
 After Hours Phone: 619-662-4100  
 License Number: C172036  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
 MO 9:00AM-5:00PM  
 TU 9:00AM-5:00PM  
 WE 9:00AM-5:00PM  
 TH 9:00AM-5:00PM  
 FR 9:00AM-5:00PM  
 SA 9:00AM-5:00PM



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

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

### SAN YSIDRO HEALTH ALPINE FAMILY MEDICINE



Provider ID: 517802  
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901-1103

 Phone: 619-662-4100  
 Fax: 619-205-6305  
 After Hours Phone: 619-662-4100  
 License Number: DC28335  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
 MO 9:00AM-5:00PM  
 TU 9:00AM-5:00PM  
 WE 9:00AM-5:00PM  
 TH 9:00AM-5:00PM  
 FR 9:00AM-5:00PM  
 SA 9:00AM-5:00PM

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

## BORREGO SPRINGS

### BORREGO MEDICAL CLINIC

Provider ID: 185179  
 4343 YAQUI PASS RD BORREGO SPRINGS, CA 92004  
 Phone: 760-767-5051  
 After Hours Phone: 760-767-5051  
 License Number: C39104  
 NPI: 1134144165  
 Accepting New Patients: Yes

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

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION

Website: N/A

### **BORREGO MEDICAL CLINIC**

Provider ID: 185179

4343 YAQUI PASS RD  
BORREGO SPRINGS, CA  
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:  
760-767-5051

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION

Website: N/A

### **BORREGO MEDICAL CLINIC**

Provider ID: 185179

4343 YAQUI PASS RD  
BORREGO SPRINGS, CA  
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:  
760-767-5051

License Number: 80000651

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: Yes

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION

Website: N/A

### **BORREGO MEDICAL CLINIC**

Provider ID: 185179

4343 YAQUI PASS RD  
BORREGO SPRINGS, CA  
92004

Phone: 760-767-5051

Fax: 760-767-4552

After Hours Phone:  
760-767-5051

License Number: G85319

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

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



## B. 联邦合资质的健康诊所

### FOUNDATION


 Website: N/A


#### CAMPO

### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:  
619-445-6200


License Number: 20A17296

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028

 Phone: 619-445-6200

 After Hours Phone:  
619-445-6200

License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE

Provider ID: 519686

 1388 BUCKMAN SPRINGS  
RD  
CAMPO, CA 91906-2028

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A18400

NPI: 1598122871

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

 Site English Spoken: Yes

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

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: N/A*

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

*Provider ID: 519686*

 1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906-2028

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

*License Number: 90000660*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: N/A*

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

*Provider ID: 519686*

 1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906-2028

 *Phone: 619-662-4100*

 *After Hours Phone: 619-662-4100*

*License Number: PA20490*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: N/A*


## **CARLSBAD**

### **TRUECARE**

*Provider ID: 480120*

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

 *Phone: 760-736-6767*

 *After Hours Phone: 760-736-6767*

*License Number: A131678*


*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

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

*American Sign Language (ASL):*

*N*


 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: N/A*


### **TRUECARE**


*Provider ID: 480120*

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

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

## B. 联邦合资质的健康诊所

 Phone: 760-736-6767


 After Hours Phone:  
760-736-6767

License Number: A49273


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### TRUECARE

Provider ID: 480120

 1295 CARLSBAD VILLAGE

DR, STE 100

CARLSBAD, CA

92008-1950

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: A93248


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### TRUECARE

Provider ID: 480120


 1295 CARLSBAD VILLAGE

DR, STE 100

CARLSBAD, CA

92008-1950

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: G74757


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### TRUECARE

Provider ID: 480120


 1295 CARLSBAD VILLAGE

DR, STE 100

CARLSBAD, CA

92008-1950

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: PA53036


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

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

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

Fax: 760-720-7204

After Hours Phone:

760-736-6767

License Number: 80000630

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480120

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

Phone: 760-736-6767

Fax: 760-720-7204

After Hours Phone:  
760-736-6767

License Number: PA22667

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### CHULA VISTA

#### OTAY FAMILY HEALTH CLINIC

Provider ID: 314546

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

Phone: 619-205-1376

After Hours Phone:  
619-205-1376

License Number: A179598

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No




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

American Sign Language (ASL):

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




## B. 联邦合资质的健康诊所

- 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 8:00AM-5:00PM**  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
**N**  
 **Accessibility: CONTACT PROVIDER**  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 **Website: www.ihpsocal.org**
- OTAY FAMILY HEALTH CLINIC**  
Provider ID: 314546  
 1637 3RD AVE STE H  
CHULA VISTA, CA  
91911-5823  
 **Phone: 619-662-4100**  
**Fax: 619-336-2323**  
 **After Hours Phone: 619-662-4100**  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None
-  **Site English Spoken: Yes**  
**Cultural Competency: No**  
 **Hours: SU 8:00AM-5:00PM**  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
**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 8:00AM-5:00PM**  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
**N**  
 **Accessibility: CONTACT PROVIDER**  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 **Website: www.ihpsocal.org**
- SAN YSIDRO HEALTH CHULA VISTA**  
Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 **Phone: 619-662-4100**  
 **After Hours Phone: 619-662-4100**  
License Number: 20A11087  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 **Site English Spoken: Yes**  
**Cultural Competency: No**  
 **Hours: SU 8:00AM-5:00PM**  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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


## B. 联邦合资质的健康诊所



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

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

**SAN YSIDRO HEALTH CHULA VISTA**

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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


License Number: 20A12555

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


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



 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: 20A13225

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


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



 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100  
 After Hours Phone:

619-662-4100


License Number: 20A14025

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


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



 **Accessibility: CONTACT PROVIDER**

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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


License Number: 20A19485

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

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

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100


License Number: 20A9060

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):


N


 Accessibility: CONTACT

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100


License Number: A106103

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100


License Number: A114600

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A114893


NPI: 1598122871

Accepting New Patients: Yes


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

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A115598


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

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


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A115699


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


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


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A120584


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

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



## B. 联邦合资质的健康诊所

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A120672

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

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

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

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

*Provider ID:* 427322

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

📞 *Phone:* 619-662-4100

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A121861

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

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

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

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

*Provider ID:* 427322

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

📞 *Phone:* 619-662-4100

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A123263

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

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

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

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

*Provider ID:* 427322

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

📞 *Phone:* 619-662-4100

📞 *After Hours Phone:*  
619-662-4100

*License Number:* A123492

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

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

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

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA


🌐 *Website:* www.ihpsocal.org


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


## B. 联邦合资质的健康诊所

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A123604

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: A127706

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A134303

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A138474

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT

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

## B. 联邦合资质的健康诊所

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

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

Provider ID: 427322

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

License Number: A138534

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: A159831

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: A162816

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: A163183

NPI: 1598122871

Accepting New Patients: Yes



Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No






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


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




## B. 联邦合资质的健康诊所



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

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



Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A164392  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM




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


**VISTA**  
Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A177922  
NPI: 1598122871




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


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

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

 After Hours Phone:  
619-662-4100  
License Number: A87650  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

**SAN YSIDRO HEALTH CHULA VISTA**  
Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A93785  
NPI: 1598122871

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

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## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C55563


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: DC20760

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: DC31963


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:

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

## B. 联邦合资质的健康诊所

619-662-4100  
License Number: DC33295  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

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

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

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

Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: DDS102880  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):

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

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

American Sign Language (ASL):  
N  
 Accessibility: CONTACT

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

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

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

License Number: G57243  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

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



Provider ID: 427322

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## B. 联邦合资质的健康诊所

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: G59670  
NPI: 1598122871

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736


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


License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736


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


License Number: G74728

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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

License Number: G80234

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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


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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP12112

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95015413

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: PA54404

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: SP18192

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No



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

American Sign Language (ASL):  
N




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





## B. 联邦合资质的健康诊所

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







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

*Provider ID: 427322*  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 *Phone: 619-662-4100*  
*Fax: 619-425-1184*  
 *After Hours Phone: 619-662-4100*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL): N*

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


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



*Provider ID: 206355*  
 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628  
 *Phone: 619-515-2500*  
 *After Hours Phone: 619-515-2500*  
*License Number: 20A11535*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
 *Site Languages(s) Spoken: Spanish*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*

*American Sign Language (ASL): N*



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

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

*Provider ID: 206355*  
 251 LANDIS AVE  
CHULA VISTA, CA



91910-2628  
 *Phone: 619-515-2500*  
 *After Hours Phone: 619-515-2500*  
*License Number: 20A14919*  
*NPI: 1134155377*

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

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

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

*American Sign Language (ASL): N*

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

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

*Provider ID: 206355*  
 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628  
 *Phone: 619-515-2500*  
 *After Hours Phone: 619-515-2500*  
*License Number: A108228*  
*NPI: 1134155377*

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

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT

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

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A119689

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

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

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

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

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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


### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE

CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A153344

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A154298

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

## B. 联邦合资质的健康诊所

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL): HEALTH CENTERS OF SAN

DIEGO

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: 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 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A164859

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 Phone: 619-515-2500

 After Hours Phone:  
619-515-2500

License Number: A177698

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

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



## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: A178499*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: A68463*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: A72005*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

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

## B. 联邦合资质的健康诊所

License Number: A73172  
NPI: 1134155377

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

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

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A78355

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

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

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

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: DC26269

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

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

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


American Sign Language (ASL):  
N

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

## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: DPM4819*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: NP95001492*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: NP95001705*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

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

## B. 联邦合资质的健康诊所

License Number: NP95001964  
NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken: Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: PT291706

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


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



## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: PT292823*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*


*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: PT293536*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: PT294245*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

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

## B. 联邦合资质的健康诊所

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: PT37189

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

Fax: 619-397-1161

After Hours Phone:  
619-515-2500

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHULA VISTA FAMILY HLTH CTR

Provider ID: 206355

252 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

Phone: 619-515-2500

After Hours Phone:  
619-515-2500

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):


N

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

## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: G78814*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*


*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: NM792*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

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

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

*License Number: NP10943*

*NPI: 1134155377*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: Yes*

*Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

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

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


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


 *Website: www.fhcsd.org*

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

*Provider ID: 206355*

 251 LANDIS AVE  
CHULA VISTA, CA  
91910-2628

 *Phone: 619-515-2500*

 *After Hours Phone: 619-515-2500*

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

## B. 联邦合资质的健康诊所

License Number: NP23687

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL): Website: [www.fhcsd.org](http://www.fhcsd.org)  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### **FAMILY 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 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL): Website: [www.fhcsd.org](http://www.fhcsd.org)  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

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

Provider ID: 417641

352 L ST  
CHULA VISTA, CA  
91911-1208

Phone: 619-515-2325

After Hours Phone:  
619-515-2325

License Number: PA19306

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

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

Provider ID: 417641

352 L ST  
CHULA VISTA, CA  
91911-1208

Phone: 619-515-2325

Fax: 619-420-0660

After Hours Phone:  
619-515-2325

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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





## B. 联邦合资质的健康诊所


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

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

Provider ID: 417641

 352 L ST  
CHULA VISTA, CA  
91911-1208

 Phone: 619-515-2325  
Fax: 619-420-0660

 After Hours Phone:  
619-515-2325

License Number: 550002305  
NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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


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

Provider ID: 427322

 678 3RD AVE

CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A40061

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

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


License Number: A40473

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

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

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736


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


License Number: A41486

NPI: 1598122871

Accepting New Patients: Yes



Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No






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


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




## B. 联邦合资质的健康诊所



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

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



Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A47906  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM




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

**VISTA**  
Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A50477  
NPI: 1598122871




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


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

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

 After Hours Phone:  
619-662-4100  
License Number: A56153  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM


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

**SAN YSIDRO HEALTH CHULA VISTA**  
Provider ID: 427322  
 678 3RD AVE  
CHULA VISTA, CA  
91910-5736  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A66903  
NPI: 1598122871

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

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

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A69264


NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A77936

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### SAN YSIDRO HEALTH CHULA VISTA

Provider ID: 427322

 678 3RD AVE  
CHULA VISTA, CA  
91910-5736

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A80185


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://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: A49591

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

## B. 联邦合资质的健康诊所

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### CHULA VISTA PEDIATRICS

Provider ID: 482034

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

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A82912

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### CHULA VISTA PEDIATRICS

Provider ID: 482034

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

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: C51110

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

### CHULA VISTA PEDIATRICS

Provider ID: 482034

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

Phone: 619-662-4100

Fax: 619-662-4196

After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-4:00PM

MO 9:00AM-4:00PM

TU 9:00AM-4:00PM

WE 9:00AM-4:00PM

TH 9:00AM-4:00PM

FR 9:00AM-4:00PM

SA 9:00AM-4:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

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



## B. 联邦合资质的健康诊所


619-795-5991  
License Number: 20A14222  
NPI: 1609849074  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC


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

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY  
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:  
619-795-5991


License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

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

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY  
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:  
619-795-5991

License Number: A123929

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC

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

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY  
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

 After Hours Phone:  
619-795-5991


License Number: A160760

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

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

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



## B. 联邦合资质的健康诊所

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:  
619-795-5991

License Number: G50634

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

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

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:  
619-795-5991

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

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

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416

Phone: 619-795-5991

After Hours Phone:  
619-795-5991

License Number: PA58466

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

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

### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

1032 BROADWAY  
EL CAJON, CA 92021-7416

Phone: 619-795-5991

Fax: 619-795-5992

After Hours Phone:  
619-795-5991

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

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

## B. 联邦合资质的健康诊所

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC

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


### LA MAESTRA CHC EL CAJON BROADWAY

Provider ID: 418501

 1032 BROADWAY  
EL CAJON, CA 92021-7416

 Phone: 619-795-5991

Fax: 619-795-5992

 After Hours Phone:  
619-795-5991

License Number: 550003567

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


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

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

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

 Phone: 619-269-1262

 After Hours Phone:  
619-269-1262

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


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

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

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

 Phone: 619-312-0347

 After Hours Phone:  
619-312-0347


License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA


MAESTRA FAMILY CLINIC

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

### FAMILY HLTH CTR SAN DIEGO-EL CAJON

Provider ID: 418340

 526 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



 Site English Spoken: Yes  
Cultural Competency: No

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




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

## B. 联邦合资质的健康诊所



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

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


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



Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
Fax: 619-269-0191  
 After Hours Phone:  
619-515-2498  
License Number: 550003553  
NPI: 1134155377

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

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




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



Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2499  
 After Hours Phone:  
619-515-2499  
License Number: RN428876  
NPI: 1134155377

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

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

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

Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2300  
 After Hours Phone:  
619-515-2300  
License Number: PT293536  
NPI: 1134155377

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

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

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

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

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

## B. 联邦合资质的健康诊所

License Number: 20A11535


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

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


### **FAMILY HLTH CTR SAN**


#### **DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST

EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: 20A13060


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

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


### **FAMILY HLTH CTR SAN**


#### **DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST

EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: 20A13745


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

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


### **FAMILY HLTH CTR SAN**


#### **DIEGO-EL CAJON**

Provider ID: 418340

 525 E MAIN ST

EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: 20A14919


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

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

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





## B. 联邦合资质的健康诊所

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: A107093

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
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## B. 联邦合资质的健康诊所

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



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



Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: A118095  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM


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

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

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

Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: A127798  
NPI: 1134155377



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


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

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

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

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



License Number: A134303  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

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

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

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

Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: A138815  
NPI: 1134155377

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

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

## B. 联邦合资质的健康诊所

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

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A144974

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


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


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A146838

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A147976

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

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

## B. 联邦合资质的健康诊所

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: A152462

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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


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


## B. 联邦合资质的健康诊所

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: A175325

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM


American Sign Language (ASL):  
N

 Accessibility: CONTACT






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




## B. 联邦合资质的健康诊所

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


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



Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: A83390  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM


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

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

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

Provider ID: 418340  
 525 E MAIN ST  
EL CAJON, CA 92020-4007  
 Phone: 619-515-2498  
 After Hours Phone:  
619-515-2498  
License Number: C174771  
NPI: 1134155377



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


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

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

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

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



License Number: DC33150  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

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

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

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

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

License Number: DC33869  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM

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



## B. 联邦合资质的健康诊所

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

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


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


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: NM1721

NPI: 1134155377

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

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

## B. 联邦合资质的健康诊所

License Number: A114181  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

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



Provider ID: 418340

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

License Number: A116680


NPI: 1134155377


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

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

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

American Sign Language (ASL):  
N

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

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

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


Provider ID: 418340

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

License Number: NP15444

NPI: 1134155377

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

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

American Sign Language (ASL):

N  
 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

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


Provider ID: 418340

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


License Number: NP95000205

NPI: 1134155377

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

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

American Sign Language (ASL):

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

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


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## B. 联邦合资质的健康诊所

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: NP95009180

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498


 After Hours Phone:  
619-515-2498


License Number: NP95009292

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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


American Sign Language (ASL):

N






 Accessibility: CONTACT


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## B. 联邦合资质的健康诊所




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



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

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

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

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






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

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

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

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

License Number: PA23258  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

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

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



## B. 联邦合资质的健康诊所

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

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

 After Hours Phone:  
619-515-2498

License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT


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


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

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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


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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

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

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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

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

Provider ID: 418340

 525 E MAIN ST  
EL CAJON, CA 92020-4007

 Phone: 619-515-2498

Fax: 619-269-0191

 After Hours Phone:

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



## B. 联邦合资质的健康诊所

619-515-2498  
License Number: 20A19473  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL): DIEGO  
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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN

🌐 Website: www.fhcsd.org

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

📍 1111 W CHASE AVE  
EL CAJON, CA 92020-5710

☎ Phone: 619-515-2499

📞 After Hours Phone:  
619-515-2499

License Number: DC33150

NPI: 1134155377

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

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

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

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

🌐 Website: www.fhcsd.org

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

📍 1111 W CHASE AVE  
EL CAJON, CA 92020-5710

☎ Phone: 619-515-2499

📞 After Hours Phone:  
619-515-2499

License Number: NP95007253  
NPI: 1134155377

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

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

Cultural Competency: No

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

American Sign Language (ASL):  
N


♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

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


## B. 联邦合资质的健康诊所


### HEALTH CENTERS OF SAN DIEGO


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

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE  
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:  
619-515-2499

License Number: 20A13700

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


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

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE  
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:  
619-515-2499

License Number: A110192

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE  
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:  
619-515-2499

License Number: A138887

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

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

### CHASE AVENUE FAMILY HEALTH CTRS INC

Provider ID: 206354

 1111 W CHASE AVE  
EL CAJON, CA 92020-5710

 Phone: 619-515-2499

 After Hours Phone:  
619-515-2499

License Number: A170055

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

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

## B. 联邦合资质的健康诊所

Site English Spoken: Yes	SA 8:00AM-8:00PM	
Site Languages(s) Spoken: Spanish	American Sign Language (ASL): N	<b>CENTRO MEDICO EL CAJON</b>
Cultural Competency: No	Accessibility: CONTACT PROVIDER	Provider ID: 478971
Hours: SU 9:00AM-5:00PM MO 9:00AM-5:00PM TU 9:00AM-5:00PM WE 9:00AM-5:00PM TH 9:00AM-5:00PM FR 9:00AM-5:00PM SA 9:00AM-5:00PM	Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION	133 W MAIN ST STE 100 EL CAJON, CA 92020-3325
American Sign Language (ASL): N	Website: N/A	Phone: 619-401-0404
Accessibility: CONTACT PROVIDER	<b>CENTRO MEDICO EL CAJON</b>	After Hours Phone: 619-401-0404
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO	Provider ID: 478971	License Number: A98486
Website: www.fhcsd.org	133 W MAIN ST STE 100 EL CAJON, CA 92020-3325	NPI: 1134144165
<b>CENTRO MEDICO EL CAJON</b>	Phone: 619-401-0404	Accepting New Patients: Yes
Provider ID: 478971	After Hours Phone: 619-401-0404	Min/Max Age: 0\None
133 W MAIN ST STE 100 EL CAJON, CA 92020-3325	License Number: A158569	Site English Spoken: Yes
Phone: 619-401-0404	NPI: 1134144165	Cultural Competency: No
After Hours Phone: 619-401-0404	Accepting New Patients: Yes	Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM
License Number: A151547	Min/Max Age: 0\None	American Sign Language (ASL): N
NPI: 1134144165	Site English Spoken: Yes	Accessibility: CONTACT PROVIDER
Accepting New Patients: Yes	Cultural Competency: No	Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION
Min/Max Age: 0\None	Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM	Website: N/A
Site English Spoken: Yes	American Sign Language (ASL): N	<b>CENTRO MEDICO EL CAJON</b>
Cultural Competency: No	Accessibility: CONTACT PROVIDER	Provider ID: 478971
Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM	Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION	133 W MAIN ST STE 100 EL CAJON, CA 92020-3325
	Website: N/A	Phone: 619-401-0404
		After Hours Phone: 619-401-0404
		License Number: G52812

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

## B. 联邦合资质的健康诊所

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION

Website: N/A

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

Phone: 619-401-0404

After Hours Phone:  
619-401-0404

License Number: NP95001710

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION

Website: N/A

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

Phone: 619-873-8940

After Hours Phone:  
619-873-8940

License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION

Website: N/A

### **CENTRO MEDICO EL CAJON**

Provider ID: 478971

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

Phone: 619-873-8940

Fax: 619-401-0522

After Hours Phone:  
619-873-8940

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

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

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




## B. 联邦合资质的健康诊所

<p> After Hours Phone: 619-873-8940 License Number: 550000430 NPI: 1134144165 Accepting New Patients: Yes Min/Max Age: 0\None</p>	<p>MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p>	<p>Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  Website: N/A</p>
<p> Site English Spoken: Yes Cultural Competency: Yes  Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  Website: N/A</p>	<p><b>CENTRO MEDICO EL CAJON</b> 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</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  Website: N/A</p>	<p><b>CENTRO MEDICO EL CAJON</b> 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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p>
<p><b>CENTRO MEDICO EL CAJON</b> 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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-8:00PM MO 8:00AM-8:00PM TU 8:00AM-8:00PM WE 8:00AM-8:00PM TH 8:00AM-8:00PM FR 8:00AM-8:00PM SA 8:00AM-8:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: BORREGO COMMUNITY HEALTH FOUNDTION  Website: N/A</p>
<p>Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes Cultural Competency: No  Hours: SU 8:00AM-8:00PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p><b>CENTRO MEDICO EL CAJON</b> Provider ID: 478971  133 W MAIN ST STE 100 EL CAJON, CA 92020-3325</p>

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



## B. 联邦合资质的健康诊所

 Phone: 619-873-8940

 After Hours Phone:  
619-873-8940

License Number: PA16673


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-8:00PM

TU 8:00AM-8:00PM

WE 8:00AM-8:00PM

TH 8:00AM-8:00PM

FR 8:00AM-8:00PM

SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH


FOUNDTION

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A40473

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 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 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: 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 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

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

## B. 联邦合资质的健康诊所


### SOUTHERN CALIFORNIA


 Website: 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

Site English Spoken: Yes


Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A


### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD

EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C144411

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G43179

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

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

## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95009329

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM


WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95012943

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: PT40025

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: PT42665

NPI: 1598122871


Accepting New Patients: Yes

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


## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken: Spanish, Tagalog

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A


### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST

EL CAJON, CA 92019-4795

 Phone: 619-312-0347

 After Hours Phone: 619-312-0347

License Number: 20A6433


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA

MAESTRA FAMILY CLINIC


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


### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

 165 S 1ST ST

EL CAJON, CA 92019-4795

 Phone: 619-312-0347

 After Hours Phone: 619-312-0347

License Number: A123929


NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA

MAESTRA FAMILY CLINIC


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


### LA MAESTRA FAMILY CLINIC INC

Provider ID: 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

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

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

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

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267



 165 S 1ST ST



EL CAJON, CA 92019-4795

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




## B. 联邦合资质的健康诊所

 Phone: 619-312-0347  
 After Hours Phone:  
 619-312-0347  
 License Number: PA58466  
 NPI: 1609849074  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None

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

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC


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

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185267

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

 Phone: 619-312-0348

 After Hours Phone:  
 619-312-0348

License Number: G45632

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: LA MAESTRA FAMILY CLINIC


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

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
 EL CAJON, CA 92020-5714

 Phone: 619-662-4100


 After Hours Phone:  
 619-662-4100

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
 Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910

 875 EL CAJON BLVD  
 EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
 619-662-4100


License Number: 20A10964

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
 Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

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





## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

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

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A101773

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

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

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A101888

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

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

Provider ID: 569910

 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A120584

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No





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


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


## B. 联邦合资质的健康诊所

FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### SAN YSIDRO HEALTH EL CAJON


Provider ID: 569910  
 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A127706  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken: Spanish, Tagalog  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF



SOUTHERN CALIFORNIA  
 Website: N/A

### SAN YSIDRO HEALTH EL CAJON


Provider ID: 569910  
 875 EL CAJON BLVD  
EL CAJON, CA 92020-5714  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100



License Number: A131365  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken: Spanish, Tagalog  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM


American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A



### SAN YSIDRO HEALTH EL CAJON

Provider ID: 569910  
 875 EL CAJON BLVD

EL CAJON, CA 92020-5714  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100


License Number: A134995  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken: Spanish, Tagalog  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

## ENCINITAS

### 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

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

## B. 联邦合资质的健康诊所

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-753-7842

After Hours Phone:  
760-753-7842

License Number: C54157

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-753-7842

Fax: 760-736-8740

After Hours Phone:  
760-753-7842

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-753-7842

After Hours Phone:  
760-753-7842

License Number: A116562

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: 20A17306

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

## B. 联邦合资质的健康诊所

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: DC29074

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: NP21368

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: PA19437

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: PA22667

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



## B. 联邦合资质的健康诊所

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### TRUECARE

Provider ID: 480243

1130 2ND ST  
ENCINITAS, CA  
92024-5008

Phone: 760-753-7842

After Hours Phone:  
760-753-7842

License Number: A103940

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: N/A

### ESCONDIDO

#### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST  
ESCONDIDO, CA  
92025-3002

Phone: 760-520-8100

After Hours Phone:  
760-520-8100

License Number: A107557

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

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

#### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST  
ESCONDIDO, CA  
92025-3002

Phone: 760-520-8100

After Hours Phone:  
760-520-8100

License Number: A109655

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

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

#### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

460 N ELM ST  
ESCONDIDO, CA

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



## B. 联邦合资质的健康诊所

92025-3002  
☎ Phone: 760-520-8100  
🕒 After Hours Phone:  
760-520-8100  
License Number: A119661  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
🗣 Site English Spoken: Yes  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

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

### NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270  
📍 460 N ELM ST  
ESCONDIDO, CA  
92025-3002  
☎ Phone: 760-520-8100  
🕒 After Hours Phone:  
760-520-8100  
License Number: A120771  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

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

### NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270  
📍 460 N ELM ST  
ESCONDIDO, CA  
92025-3002  
☎ Phone: 760-520-8100  
🕒 After Hours Phone:  
760-520-8100  
License Number: A139490  
NPI: 1598122871

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

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

American Sign Language (ASL):  
N

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

### NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270  
📍 460 N ELM ST  
ESCONDIDO, CA  
92025-3002  
☎ Phone: 760-520-8100  
🕒 After Hours Phone:  
760-520-8100

License Number: A152372  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

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

American Sign Language (ASL):  
N

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

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


## B. 联邦资质的健康诊所


### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100

License Number: A159727

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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

### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:

760-520-8100

License Number: A45413

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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


### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100


License Number: A61751

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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


### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100


License Number: A78116

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N








 Accessibility: CONTACT

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








## B. 联邦合资质的健康诊所

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


### NEIGHBORHOOD HEALTHCARE ESCONDIDO

Provider ID: 206270  
 460 N ELM ST  
ESCONDIDO, CA  
92025-3002  
 Phone: 760-520-8100  
 After Hours Phone:  
760-520-8100  
License Number: 20A14292  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY



Provider ID: 206271  
 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
Fax: 360-462-2748  
 After Hours Phone:  
760-737-6900  
License Number: 80000158  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271  
 728 E VALLEY PKWY  
ESCONDIDO, CA

92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900  
License Number: A161074  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A


### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271  
 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900  
License Number: A94128  
NPI: 1598122871  
Accepting New Patients: Yes


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

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### 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 8:00AM-5:00PM N

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

 Phone: 760-737-6900

 After Hours Phone:  
760-737-6900

License Number: G61829


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA


 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

 Phone: 760-737-6900

 After Hours Phone:  
760-737-6900

License Number: NP8169


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A




### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271



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





## B. 联邦合资质的健康诊所

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
Fax: 360-462-2748  
 After Hours Phone:  
760-737-6900  
NPI: 1598122871

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




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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY



Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900  
License Number: A145349  
NPI: 1598122871

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




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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A



### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900



License Number: A140398  
NPI: 1598122871

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

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A



### NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409  
 Phone: 760-690-5900  
 After Hours Phone:  
760-690-5900

License Number: A56054  
NPI: 1598122871

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

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT








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










## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A


### **NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**







Provider ID: 424775  
 426 N DATE ST  
ESCONDIDO, CA  
92025-3409  
 Phone: 760-690-5900  
 After Hours Phone:  
760-690-5900  
License Number: A62467  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

### **NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**




Provider ID: 424775  
 426 N DATE ST  
ESCONDIDO, CA  
92025-3409  
 Phone: 760-690-5900  
 After Hours Phone:  
760-690-5900  
License Number: A67626  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

### **NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL**

Provider ID: 424775  
 426 N DATE ST  
ESCONDIDO, CA  
92025-3409

 Phone: 760-690-5900  
 After Hours Phone:  
760-690-5900  
License Number: G83438  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A

### **NEIGHBORHOOD HEALTHCARE 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

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

## B. 联邦合资质的健康诊所

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A


### NEIGHBORHOOD HEALTHCARE PEDIATRICS AND PRENATAL

Provider ID: 424775

 426 N DATE ST  
ESCONDIDO, CA  
92025-3409

 Phone: 760-690-5900


Fax: 360-462-2747


 After Hours Phone:  
760-690-5900

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

SA 8:00AM-5:00PM

American Sign Language (ASL):  
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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052

 Phone: 760-737-6900


 After Hours Phone:  
760-737-6900


License Number: A120348

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA






 Website: N/A


### NEIGHBORHOOD HEALTHCARE VALLEY PARKWAY

Provider ID: 206271




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



## B. 联邦合资质的健康诊所

 728 E VALLEY PKWY  
ESCONDIDO, CA  
92025-3052  
 Phone: 760-737-6900  
 After Hours Phone:  
760-737-6900  
License Number: A139490  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A




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

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



### NEIGHBORHOOD HEALTHCARE GRAND AVE




Provider ID: 206269  
 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604  
 Phone: 760-520-8200  
 After Hours Phone:  
760-520-8200  
License Number: A101773  
NPI: 1598122871

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

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

### NEIGHBORHOOD HEALTHCARE GRAND AVE

Provider ID: 206269  
 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604  
 Phone: 760-520-8200  
 After Hours Phone:  
760-520-8200

License Number: A161074  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

## B. 联邦合资质的健康诊所


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


### NEIGHBORHOOD

#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604

 Phone: 760-520-8200

 After Hours Phone:  
760-520-8200

License Number: A94128

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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


### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100

License Number: A82173

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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


### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100

License Number: A94128


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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


### NEIGHBORHOOD

#### HEALTHCARE ESCONDIDO

Provider ID: 206270

 460 N ELM ST  
ESCONDIDO, CA  
92025-3002

 Phone: 760-520-8100

 After Hours Phone:  
760-520-8100


License Number: DC12036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No
























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

American Sign Language (ASL):

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



## B. 联邦合资质的健康诊所

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><b>NEIGHBORHOOD HEALTHCARE ESCONDIDO</b></p> <p><i>Provider ID: 206270</i></p> <p> 460 N ELM ST ESCONDIDO, CA 92025-3002</p> <p> <i>Phone: 760-520-8100</i></p> <p> <i>After Hours Phone: 760-520-8100</i></p> <p><i>License Number: G61829</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p> <i>After Hours Phone: 760-520-8100</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</i></p> <p><i>American Sign Language (ASL):</i></p> <p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p><i>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</i></p> <p> <i>Website: www.ihpsocal.org</i></p>	<p><b>NEIGHBORHOOD HEALTHCARE ESCONDIDO</b></p> <p><i>Provider ID: 206270</i></p> <p> 460 N ELM ST ESCONDIDO, CA 92025-3002</p> <p> <i>Phone: 760-520-8100</i></p> <p><i>Fax: 360-466-2745</i></p>	<p><b>NEIGHBORHOOD HEALTHCARE GRAND AVE</b></p> <p><i>Provider ID: 206269</i></p> <p> 1001 E GRAND AVE ESCONDIDO, CA 92025-4604</p> <p> <i>Phone: 760-520-8200</i></p> <p> <i>After Hours Phone: 760-520-8200</i></p> <p><i>License Number: PA51508</i></p> <p><i>NPI: 1598122871</i></p> <p><i>Accepting New Patients: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p> <i>Site English Spoken: Yes</i></p> <p><i>Cultural Competency: No</i></p> <p> <i>Hours: SU 8:00AM-5:00PM</i></p>

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



## B. 联邦合资质的健康诊所

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

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749


 After Hours Phone:  
760-520-8200

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749

 After Hours Phone:  
760-520-8200

License Number: 550000697

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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

### NEIGHBORHOOD


#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604

 Phone: 760-520-8200

Fax: 360-462-2749


 After Hours Phone:  
760-520-8200

License Number: 80000397

NPI: 1598122871

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

 Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


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

### NEIGHBORHOOD

#### HEALTHCARE GRAND AVE

Provider ID: 206269

 1001 E GRAND AVE  
ESCONDIDO, CA  
92025-4604

 Phone: 760-520-8200

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

## B. 联邦合资质的健康诊所

Fax: 360-462-2749

After Hours Phone:  
760-520-8200

License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

### NEIGHBORHOOD HEALTHCARE PIDS AND PRENATAL

Provider ID: 206266

425 N DATE ST  
ESCONDIDO, CA  
92025-3413

Phone: 760-520-8340

Fax: 360-462-2752

After Hours Phone:  
760-520-8340

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

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

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

### NEIGHBORHOOD HEALTHCARE PIDS AND PRENATAL

Provider ID: 206266

425 N DATE ST  
ESCONDIDO, CA  
92025-3413

Phone: 760-520-8340

After Hours Phone:  
760-520-8340

License Number: A56054

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

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

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

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

### NEIGHBORHOOD HEALTHCARE PIDS AND PRENATAL

Provider ID: 206266

425 N DATE ST  
ESCONDIDO, CA  
92025-3413

Phone: 760-520-8340

After Hours Phone:  
760-520-8340

License Number: A67626

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C171064


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A


### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**


Provider ID: 588941

 704 E GRAND AVE

ESCONDIDO, CA

92025-4405

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G58033


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95005999


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### **SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE**

Provider ID: 588941

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95006360


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: PA52347

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 Phone: 619-662-4100

Fax: 619-662-7952

 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### SAN YSIDRO HEALTH ESCONDIDO FAMILY MEDICINE

Provider ID: 588941

 704 E GRAND AVE  
ESCONDIDO, CA  
92025-4405

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: PA20490

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### FALLBROOK

### VISTA COMMUNITY CLINIC

Provider ID: 624122


 321 E ALVARADO ST  
FALLBROOK, CA  
92028-2912

 Phone: 760-723-6200

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 *After Hours Phone:*  
760-723-6200


*License Number:* NP95003447  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

*Site English Spoken:* Yes  
*Cultural Competency:* No

 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

*American Sign Language (ASL):*  
N


 *Accessibility:* CONTACT  
PROVIDER


*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA


 *Website:* [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### FALLBROOK FAMILY HLTH CTR

*Provider ID:* 183910

 1328 S MISSION RD  
FALLBROOK, CA  
92028-4006

 *Phone:* 760-451-4720  
*Fax:* 760-451-4700

 *After Hours Phone:*  
760-451-4720


*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

*Site English Spoken:* Yes

*Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No

 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N


 *Accessibility:* CONTACT  
PROVIDER


*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA


 *Website:* N/A

### FALLBROOK FAMILY HLTH CTR

*Provider ID:* 183910

 1328 S MISSION RD  
FALLBROOK, CA  
92028-4006

 *Phone:* 760-451-4720  
*Fax:* 760-451-4700


 *After Hours Phone:*  
760-451-4720

*License Number:* 80000150  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

*Site English Spoken:* Yes  
 *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No

 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM

WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N


 *Accessibility:* CONTACT  
PROVIDER


*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA


 *Website:* N/A

### FALLBROOK FAMILY HLTH CTR

*Provider ID:* 183910

 1328 S MISSION RD  
FALLBROOK, CA  
92028-4006

 *Phone:* 760-451-4770


 *After Hours Phone:*  
760-451-4770

*License Number:* A169529  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

*Site English Spoken:* Yes  
 *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No

 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

 *Accessibility:* CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A


### 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

#### IMPERIAL BEACH HEALTH CENTER

Provider ID: 179678

 949 PALM AVE  
IMPERIAL BEACH, CA  
91932-1503

 Phone: 619-429-3733

 After Hours Phone:  
619-429-3733


License Number: A66830

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### LA MESA


#### LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE  
200  
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:  
619-464-6434

License Number: A113241


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDATION

 Website: N/A

#### LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE  
200  
LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:  
619-464-6434

License Number: A89865

NPI: 1134144165

Accepting New Patients: Yes


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION


 Website: N/A

### LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone: 619-464-6434

License Number: C133872


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION


 Website: N/A


### LA MESA PEDIATRICS

Provider ID: 480827

 8881 FLETCHER PKWY STE 200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

 After Hours Phone: 619-464-6434

License Number: NP95017921


NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

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 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: BORREGO

COMMUNITY HEALTH

FOUNDTION

 Website: N/A

### LA MESA PEDIATRICS


Provider ID: 480827

 8881 FLETCHER PKWY STE 200


LA MESA, CA 91942-3135

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:  
619-464-6434

License Number: 20A11733

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION


 Website: N/A

### LA MESA PEDIATRICS


Provider ID: 480827

 8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942-3135

 Phone: 619-464-6434

Fax: 619-464-5109

 After Hours Phone:  
619-464-6434

License Number: 550000430

NPI: 1134144165

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: Yes

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: BORREGO  
COMMUNITY HEALTH  
FOUNDTION

 Website: N/A


### LAKESIDE


#### NEIGHBORHOOD

#### HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST  
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

 After Hours Phone:  
858-218-3000

License Number: A152372


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: www.ihpsocal.org


#### NEIGHBORHOOD

#### HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST  
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

 After Hours Phone:  
858-218-3000

License Number: A43914


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD


#### HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST  
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

Fax: 360-462-2744

 After Hours Phone:  
858-218-3000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD

#### HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST  
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### NEIGHBORHOOD

#### HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST  
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

 After Hours Phone:  
858-218-3000


License Number: DC33688

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### NEIGHBORHOOD


#### HEALTHCARE LAKESIDE

Provider ID: 353843

 10039 VINE ST  
LAKESIDE, CA 92040-3120

 Phone: 858-218-3000

Fax: 360-462-2744


 After Hours Phone:  
858-218-3000

License Number: 80000483

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### LEMON GROVE

#### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: A114181

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

#### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN


DIEGO


 Website: N/A

#### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550


 After Hours Phone:  
619-515-2550

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*  *Website: N/A*

*N*


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: N/A*

### **LEMON GROVE FAMILY HEALTH CENTER**

*Provider ID: 419139*

 *7592 BROADWAY  
LEMON GROVE, CA  
91945-1604*

 *Phone: 619-515-2550*

 *After Hours Phone:  
619-515-2550*

*License Number: A154298*


*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*  *Website: N/A*


*N*


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

### **LEMON GROVE FAMILY HEALTH CENTER**

*Provider ID: 419139*

 *7592 BROADWAY  
LEMON GROVE, CA  
91945-1604*

 *Phone: 619-515-2550*

 *After Hours Phone:  
619-515-2550*

*License Number: A154838*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*  *Website: N/A*


*N*


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

### **LEMON GROVE FAMILY HEALTH CENTER**

*Provider ID: 419139*

 *7592 BROADWAY  
LEMON GROVE, CA  
91945-1604*

 *Phone: 619-515-2550*

 *After Hours Phone:  
619-515-2550*

*License Number: A163464*


*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

*American Sign Language (ASL):*  *Website: N/A*





### **LEMON GROVE FAMILY HEALTH CENTER**

*Provider ID: 419139*



 *7592 BROADWAY  
LEMON GROVE, CA*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所



91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: A164859  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: A165925  
NPI: 1134155377  
Accepting New Patients: Yes






Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: A178499  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM






FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):


N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139  
 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604  
 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550  
License Number: A68463  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: 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: C172318

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550


 After Hours Phone:  
619-515-2550

License Number: NP15444

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: NP95001050

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: NP95008782

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550


License Number: NP95009933

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所


 After Hours Phone:  
619-515-2550


License Number: NP95013978  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: N/A  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: PA12416


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: N/A  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604


 Phone: 619-515-2550

 After Hours Phone:  
619-515-2550

License Number: PA56072


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM


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: RN428876


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550  
Fax: 619-825-9577

 After Hours Phone:  
619-515-2550

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A


### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA

91945-1604

 Phone: 619-515-2550  
Fax: 619-825-9577

 After Hours Phone:  
619-515-2550

License Number: 550001268

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER



Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604


 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550


 After Hours Phone:  
619-515-2550

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None



 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所



WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2500  
 After Hours Phone:  
619-515-2500

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None


Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT



PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER



Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER

Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604


 Phone: 619-515-2550  
 After Hours Phone:  
619-515-2550

License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: N/A

### LEMON GROVE FAMILY HEALTH CENTER


Provider ID: 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604


 Phone: 619-515-2550


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 *After Hours Phone:*  
619-515-2550  
*License Number:* A102060  
*NPI:* 1134155377  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

 *Site English Spoken:* Yes  
*Cultural Competency:* No  
 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM


*American Sign Language (ASL):*  Website: N/A  
N


 *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO


 *Website:* N/A

### LEMON GROVE FAMILY HEALTH CENTER

*Provider ID:* 419139

 7592 BROADWAY  
LEMON GROVE, CA  
91945-1604

 *Phone:* 619-515-2550

 *After Hours Phone:*  
619-515-2550


*License Number:* A107323

*NPI:* 1134155377


*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

 *Site English Spoken:* Yes

*Cultural Competency:* No  
 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

*American Sign Language (ASL):*  
N

 *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* FAMILY HEALTH CENTERS OF SAN DIEGO


 *Website:* N/A

### NATIONAL CITY

#### SAN YSIDRO HEALTH NATIONAL CITY

*Provider ID:* 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 *Phone:* 619-662-4100

 *After Hours Phone:*  
619-662-4100


*License Number:* A138919

*NPI:* 1598122871

*Accepting New Patients:* Yes

*Min/Max Age:* 0\None

 *Site English Spoken:* Yes  
*Cultural Competency:* No

 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

 *Accessibility:* CONTACT PROVIDER


*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

 *Website:* www.ihpsocal.org

### 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

 *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C55180

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100  
Fax: 619-336-2323

 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100  
Fax: 619-336-2323

 After Hours Phone:  
619-662-4100


License Number: A112571

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412


 Phone: 619-662-4100  
Fax: 619-474-3722


 After Hours Phone:  
619-662-4100

License Number: A55469

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

SA 8:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH NATIONAL CITY**

Provider ID: 227412

 1136 D AVE  
NATIONAL CITY, CA  
91950-3412

 Phone: 619-662-4100

Fax: 619-474-3722

 After Hours Phone:  
619-662-4100

License Number: G46444


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH PARADISE HILLS**

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A118227

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH PARADISE HILLS**

Provider ID: 227418

 2400 E 8TH ST STE A

NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A138534

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH PARADISE HILLS**

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A146819

NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A157488

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: A167529

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH PARADISE HILLS

Provider ID: 227418

2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: G88347

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH**

#### **PARADISE HILLS**

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

Fax: 619-259-2806

 After Hours Phone:  
619-662-4100


License Number: 20A11518

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH**

#### **PARADISE HILLS**

Provider ID: 227418

 2400 E 8TH ST STE A

NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

Fax: 619-259-2807


 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH**


#### **PARADISE HILLS**

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

Fax: 619-259-2807

 After Hours Phone:  
619-662-4100


License Number: A113624

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH**


#### **PARADISE HILLS**

Provider ID: 227418

 2400 E 8TH ST STE A  
NATIONAL CITY, CA  
91950-2956

 Phone: 619-662-4100

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:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Tagalog, Spanish*  
*Cultural Competency: No*  
🕒 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
*N*  
♿ *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
🌐 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH NATIONAL CITY**

*Provider ID: 227412*  
📍 1136 D AVE  
NATIONAL CITY, CA  
91950-3412  
☎ *Phone: 619-336-2300*  
📞 *After Hours Phone: 619-336-2300*

*License Number: A78373*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

📄 *Site English Spoken: Yes*  
*Cultural Competency: No*  
🕒 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
*N*  
♿ *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
🌐 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH NATIONAL CITY**

*Provider ID: 227412*  
📍 1136 D AVE  
NATIONAL CITY, CA  
91950-3412  
☎ *Phone: 619-428-4463*  
📞 *After Hours Phone: 619-428-4463*

*License Number: G71855*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

📄 *Site English Spoken: Yes*  
*Cultural Competency: No*  
🕒 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
*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 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
*N*  
♿ *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
🌐 *Website: www.ihpsocal.org*

### **OPERATION SAMAHAN GRANGER SCHOOL BASED**

*Provider ID: 418302*  
📍 2101 GRANGER AVE  
NATIONAL CITY, CA  
91950-6208  
☎ *Phone: 844-200-2426*  
*Fax: 619-434-8999*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
844-200-2426  
*NPI:* 1801907449  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:*  
OPERATION SAMAHAN

🌐 *Website:* [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN GRANGER SCHOOL BASED

*Provider ID:* 418302

📍 2101 GRANGER AVE  
NATIONAL CITY, CA  
91950-6208

☎ *Phone:* 844-200-2426  
*Fax:* 619-434-8999

☎ *After Hours Phone:*  
844-200-2426

*License Number:* 550002622  
*NPI:* 1801907449

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes

*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:*  
OPERATION SAMAHAN

🌐 *Website:* [www.operationsamahan.org](http://www.operationsamahan.org)

### SAN YSIDRO HEALTH 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

🌐 *Website:* [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SOUTH BAY

*Provider ID:* 361428

📍 330 E 8TH ST  
NATIONAL CITY, CA  
91950-2312

☎ *Phone:* 619-662-4100

*Fax:* 619-259-2807

☎ *After Hours Phone:*  
619-662-4100

*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

🌐 *Website:* [www.ihpsocal.org](http://www.ihpsocal.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH SOUTH BAY**

Provider ID: 361428

330 E 8TH ST  
NATIONAL CITY, CA  
91950-2312

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 20A12653

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SOUTH BAY**

Provider ID: 361428

330 E 8TH ST  
NATIONAL CITY, CA  
91950-2312

Phone: 619-662-4100

After Hours Phone:

619-662-4100

License Number: A133539

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **OPERATION SAMAHAN - NATIONAL C**

Provider ID: 417102

2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

Phone: 844-200-2426

After Hours Phone:  
844-200-2426

License Number: A74777

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

Hours: SU 8:00AM-6:00PM  
MO 8:00AM-6:00PM  
TU 8:00AM-6:00PM  
WE 8:00AM-6:00PM  
TH 8:00AM-6:00PM  
FR 8:00AM-6:00PM  
SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### **OPERATION SAMAHAN - NATIONAL C**

Provider ID: 417102

2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

Phone: 844-200-2426

After Hours Phone:  
844-200-2426

License Number: NP22974

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No


Hours: SU 8:00AM-6:00PM  
MO 8:00AM-6:00PM  
TU 8:00AM-6:00PM  
WE 8:00AM-6:00PM  
TH 8:00AM-6:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

FR 8:00AM-6:00PM  
SA 8:00AM-6:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN


 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

 Phone: 844-200-2426

 After Hours Phone:  
844-200-2426

License Number: NP95000203

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-6:00PM

MO 8:00AM-6:00PM

TU 8:00AM-6:00PM


WE 8:00AM-6:00PM

TH 8:00AM-6:00PM

FR 8:00AM-6:00PM


SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

 Phone: 844-200-2426

Fax: 619-474-3919

 After Hours Phone:  
844-200-2426

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-6:00PM

MO 8:00AM-6:00PM

TU 8:00AM-6:00PM

WE 8:00AM-6:00PM

TH 8:00AM-6:00PM

FR 8:00AM-6:00PM


SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


### OPERATION SAMAHAN - NATIONAL C

Provider ID: 417102

 2743 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-7410

 Phone: 844-200-2426

Fax: 619-474-3919

 After Hours Phone:  
844-200-2426

License Number: 90000183

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Tagalog, Lao, Spanish

Cultural Competency: No

 Hours: SU 8:00AM-6:00PM

MO 8:00AM-6:00PM

TU 8:00AM-6:00PM

WE 8:00AM-6:00PM

TH 8:00AM-6:00PM

FR 8:00AM-6:00PM


SA 8:00AM-6:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN GRANGER SCHOOL BASED

Provider ID: 418302

 2101 GRANGER AVE






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




NATIONAL CITY, CA  
91950-6208  
 Phone: 844-200-2426  
 After Hours Phone:  
844-200-2426  
License Number: NP95000203  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

**LA MAESTRA FAMILY CLINIC  
INC**  
Provider ID: 185270  
 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518  
 Phone: 619-434-7308  
 After Hours Phone:  
619-434-7308  
License Number: G45632  
NPI: 1609849074  
Accepting New Patients: Yes

Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

**LA MAESTRA FAMILY CLINIC  
INC**  
Provider ID: 185270  
 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518  
 Phone: 619-434-7308  
Fax: 619-434-7310  
 After Hours Phone:  
619-434-7308  
License Number: NP95013257  
NPI: 1609849074  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM

TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)


**LA MAESTRA FAMILY CLINIC  
INC**  
Provider ID: 185270  
 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518  
 Phone: 619-564-8765  
 After Hours Phone:  
619-564-8765

License Number: NP95009891  
NPI: 1609849074  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: LA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


### MAESTRA FAMILY CLINIC

 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-798-3977

 After Hours Phone:  
619-798-3977

License Number: A41375

NPI: 1609849074


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-434-7308

 After Hours Phone:  
619-434-7308

License Number: C55979

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518

 Phone: 619-280-4213


 After Hours Phone:  
619-280-4213

License Number: A167184

NPI: 1609849074

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: LA


MAESTRA FAMILY CLINIC


 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270

 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518


 Phone: 619-434-7308


 After Hours Phone:  
619-434-7308

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No





 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)






### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185270  
 217 HIGHLAND AVE  
NATIONAL CITY, CA  
91950-1518  
 Phone: 619-434-7308  
 After Hours Phone:  
619-434-7308  
License Number: A123929  
NPI: 1609849074  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM


American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: LA


MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930  
 1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856  
 Phone: 619-515-2399  
 After Hours Phone:  
619-515-2399  
License Number: 20A18460  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-3:30PM  
MO 8:30AM-3:30PM  
TU 8:30AM-3:30PM  
WE 8:30AM-3:30PM  
TH 8:30AM-3:30PM  
FR 8:30AM-3:30PM  
SA 8:30AM-3:30PM




American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930




 1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856  
 Phone: 619-515-2399  
 After Hours Phone:  
619-515-2399  
License Number: A163862  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-3:30PM  
MO 8:30AM-3:30PM  
TU 8:30AM-3:30PM  
WE 8:30AM-3:30PM  
TH 8:30AM-3:30PM  
FR 8:30AM-3:30PM  
SA 8:30AM-3:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930  
 1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856  
 Phone: 619-515-2399  
 After Hours Phone:  
619-515-2399  
License Number: A176878  
NPI: 1134155377

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

Phone: 619-515-2399

After Hours Phone:  
619-515-2399

License Number: NP95010663

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

Phone: 619-515-2399

After Hours Phone:  
619-515-2399

License Number: PA55660

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR SD NATIONAL CITY

Provider ID: 418930

1000 EUCLID AVE  
NATIONAL CITY, CA  
91950-3856

Phone: 619-515-2399

Fax: 619-269-0053

After Hours Phone:  
619-515-2399

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-3:30PM

MO 8:30AM-3:30PM

TU 8:30AM-3:30PM

WE 8:30AM-3:30PM

TH 8:30AM-3:30PM

FR 8:30AM-3:30PM

SA 8:30AM-3:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### **FAMILY HEALTH CTR 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 8:30AM-3:30PM  
MO 8:30AM-3:30PM  
TU 8:30AM-3:30PM  
WE 8:30AM-3:30PM  
TH 8:30AM-3:30PM  
FR 8:30AM-3:30PM  
SA 8:30AM-3:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **OCEANSIDE**

#### **TRUECARE**

Provider ID: 480315

3220 MISSION AVE STE 1  
OCEANSIDE, CA  
92058-1354

Phone: 760-433-3155

After Hours Phone:  
760-433-3155

License Number: PA19825

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

#### **TRUECARE**

Provider ID: 480315

3220 MISSION AVE STE 1  
OCEANSIDE, CA  
92058-1354

Phone: 760-433-3155

After Hours Phone:  
760-433-3155

License Number: PA53036

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

#### **TRUECARE**

Provider ID: 480315

3220 MISSION AVE STE 1  
OCEANSIDE, CA  
92058-1354

Phone: 760-433-3155

Fax: 760-736-8740

After Hours Phone:  
760-433-3155

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### TRUECARE

Provider ID: 480315  
3220 MISSION AVE STE 1  
OCEANSIDE, CA  
92058-1354  
Phone: 760-433-3155  
Fax: 760-736-8740  
After Hours Phone:  
760-433-3155  
License Number: 80000240  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### TRUECARE

Provider ID: 480315  
3220 MISSION AVE STE 1

OCEANSIDE, CA  
92058-1354  
Phone: 760-736-6767  
After Hours Phone:  
760-736-6767  
License Number: NP21368  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### TRUECARE

Provider ID: 480315  
3220 MISSION AVE STE 1  
OCEANSIDE, CA  
92058-1354  
Phone: 760-891-4667  
After Hours Phone:  
760-891-4667  
License Number: A131678  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None




Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### TRUECARE





Provider ID: 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 Language(s) Spoken:  
Spanish  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SA 8:00AM-5:00PM  
 American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)





### TRUECARE



Provider ID: 296476  
 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 Fax: 760-736-8740  
 After Hours Phone:  
 760-757-4566  
 License Number: 80000240  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### TRUECARE

Provider ID: 296476  
 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 Fax: 760-757-3004  
 After Hours Phone:  
 760-757-4566  
 License Number: A66289  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA




### TRUECARE

Provider ID: 296477  
 605 CROUCH ST BLDG C

OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 Fax: 760-757-3004  
 After Hours Phone:  
 760-757-4566  
 License Number: A116562  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 296478  
 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 After Hours Phone:  
 760-757-4566  
 License Number: NP21368  
 NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: A131678

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: NP95012681

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### TRUECARE

Provider ID: 296476

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-736-6767  
 After Hours Phone:  
 760-736-6767  
 License Number: NP95013879  
 NPI: 1598122871

Accepting New Patients: Yes  
 Min/Max Age: 0\None

Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish

Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):  
 N




 Accessibility: CONTACT  
 PROVIDER

Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE


Provider ID: 296476

 605 CROUCH ST BLDG C  
 OCEANSIDE, CA  
 92054-4415  
 Phone: 760-757-4566  
 After Hours Phone:  
 760-757-4566

License Number: 20A15689  
 NPI: 1598122871

Accepting New Patients: Yes  
 Min/Max Age: 0\None

Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish

Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):  
 N




 Accessibility: CONTACT  
 PROVIDER

Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://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: C152937

NPI: 1598122871

Accepting New Patients: Yes  
 Min/Max Age: 0\None

Site English Spoken: Yes  
 Site Languages(s) Spoken:  
 Spanish

Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM

TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):  
 N




 Accessibility: CONTACT  
 PROVIDER

Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://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 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 296476  
605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415  
Phone: 760-757-4566  
After Hours Phone:  
760-757-4566  
License Number: PA53036  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 296476

605 CROUCH ST BLDG C  
OCEANSIDE, CA  
92054-4415

Phone: 760-757-4566  
Fax: 760-736-8740

After Hours Phone:  
760-757-4566

NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish

Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

517 N HORNE ST  
OCEANSIDE, CA  
92054-2518

Phone: 760-631-5000  
Fax: 760-414-3892

After Hours Phone:  
760-631-5000

License Number: 80000745  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: Yes  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### VISTA COMMUNITY CLINIC HORNE STREET

Provider ID: 402436

517 N HORNE ST  
OCEANSIDE, CA  
92054-2518

Phone: 760-631-5000

After Hours Phone:  
760-631-5000

License Number: 20A17371  
NPI: 1598122871



Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### VISTA COMMUNITY CLINIC HORNE STREET




Provider ID: 402436  
 517 N HORNE ST  
OCEANSIDE, CA  
92054-2518  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000  
License Number: NP95006826  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None


Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER



Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### VISTA COMMUNITY CLINIC HORNE STREET


Provider ID: 402436  
 517 N HORNE ST  
OCEANSIDE, CA  
92054-2518  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000  
License Number: NP95007885  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM


American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### VISTA COMMUNITY CLINIC HORNE STREET


Provider ID: 402436  
 517 N HORNE ST

OCEANSIDE, CA  
92054-2518

 Phone: 760-631-5000  
Fax: 760-414-3892

 After Hours Phone:  
760-631-5000  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM




American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### VISTA COMMUNITY CLINIC 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**Cultural Competency:** No  
🕒 **Hours:** SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

**American Sign Language (ASL):**  
N

♿ **Accessibility:** CONTACT PROVIDER

**Medical Group/IPA:** IHP OF SOUTHERN CALIFORNIA

🌐 **Website:** [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

**Provider ID:** 206341

📍 4700 N RIVER RD  
OCEANSIDE, CA 2057-6043

☎ **Phone:** 760-631-5000

📞 **After Hours Phone:**  
760-631-5000

**License Number:** 20A8949

**NPI:** 1598122871

**Accepting New Patients:** Yes

**Min/Max Age:** 0\None

🗒 **Site English Spoken:** Yes

**Cultural Competency:** No

🕒 **Hours:** SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

**American Sign Language (ASL):**  
N

♿ **Accessibility:** CONTACT PROVIDER

**Medical Group/IPA:** IHP OF SOUTHERN CALIFORNIA

🌐 **Website:** [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

**Provider ID:** 206341

📍 4700 N RIVER RD  
OCEANSIDE, CA 2057-6043

☎ **Phone:** 760-631-5000

📞 **After Hours Phone:**  
760-631-5000

**License Number:** A149340

**NPI:** 1598122871

**Accepting New Patients:** Yes

**Min/Max Age:** 0\None

🗒 **Site English Spoken:** Yes

**Cultural Competency:** No

🕒 **Hours:** SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

**American Sign Language (ASL):**  
N

♿ **Accessibility:** CONTACT PROVIDER

**Medical Group/IPA:** IHP OF SOUTHERN CALIFORNIA

🌐 **Website:** [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

**Provider ID:** 206341

📍 4700 N RIVER RD  
OCEANSIDE, CA 2057-6043

☎ **Phone:** 760-631-5000

📞 **After Hours Phone:**  
760-631-5000

**License Number:** NP95003571

**NPI:** 1598122871

**Accepting New Patients:** Yes

**Min/Max Age:** 0\None

🗒 **Site English Spoken:** Yes

**Cultural Competency:** No

🕒 **Hours:** SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

**American Sign Language (ASL):**  
N

♿ **Accessibility:** CONTACT PROVIDER

**Medical Group/IPA:** IHP OF SOUTHERN CALIFORNIA

🌐 **Website:** [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

**Provider ID:** 206341

📍 4700 N RIVER RD  
OCEANSIDE, CA 2057-6043

☎ **Phone:** 760-631-5000

📞 **After Hours Phone:**  
760-631-5000

**License Number:** NP95009284

**NPI:** 1598122871

**Accepting New Patients:** Yes

**Min/Max Age:** 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD  
OCEANSIDE, CA 2057-6043

 Phone: 760-631-5000

Fax: 760-414-3731


 After Hours Phone:  
760-631-5000

License Number: A130883

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206341

 4700 N RIVER RD  
OCEANSIDE, CA  
92057-6043

 Phone: 760-631-5000


 After Hours Phone:  
760-631-5000


License Number: NP95016368

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


### VISTA COMMUNITY CLINIC PIER VIEW WAY

Provider ID: 402434

 818 PIER VIEW WAY  
OCEANSIDE, CA  
92054-2803

 Phone: 760-631-5000

Fax: 760-414-3892


 After Hours Phone:  
760-631-5000

License Number: 80000510

NPI: 1598122871

Accepting New Patients: No

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: Yes

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC PIER VIEW WAY







Provider ID: 402434

 818 PIER VIEW WAY  
OCEANSIDE, CA


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## B. 联邦合资质的健康诊所



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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)







### PAUMA VALLEY

**NEIGHBORHOOD**  
**HEALTHCARE PAUMA VALLEY**  
Provider ID: 206267  
 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524  
 Phone: 760-742-9919  
Fax: 858-633-4696  
 After Hours Phone:  
760-742-9919  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**NEIGHBORHOOD**  
**HEALTHCARE PAUMA VALLEY**  
Provider ID: 206267  
 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524  
 Phone: 760-742-9919  
Fax: 858-633-4696  
 After Hours Phone:  
760-742-9919  
License Number: 80000671  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM

WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**NEIGHBORHOOD**  
**HEALTHCARE PAUMA VALLEY**  
Provider ID: 206267  
 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524  
 Phone: 760-742-9919  
 After Hours Phone:  
760-742-9919  
License Number: A114419  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### NEIGHBORHOOD

#### HEALTHCARE PAUMA VALLEY

Provider ID: 206267

 16650 HIGHWAY 76  
PAUMA VALLEY, CA  
92061-9524

 Phone: 760-742-9919

 After Hours Phone:  
760-742-9919

License Number: G61829


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-4:30PM

MO 8:00AM-4:30PM

TU 8:00AM-4:30PM

WE 8:00AM-4:30PM

TH 8:00AM-4:30PM

FR 8:00AM-4:30PM

SA 8:00AM-4:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### POWAY

### NEIGHBORHOOD


#### HEALTHCARE GOLD FAMILY


#### HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD

POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:  
858-218-3000

License Number: A119661


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD


#### HEALTHCARE GOLD FAMILY


#### HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD

POWAY, CA 92064-4520

 Phone: 858-218-3000


 After Hours Phone:  
858-218-3000

License Number: A120771


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### NEIGHBORHOOD


#### HEALTHCARE GOLD FAMILY


#### HEALTH CENTER

Provider ID: 481187

 13010 POWAY RD

POWAY, CA 92064-4520

 Phone: 858-218-3000

 After Hours Phone:  
858-218-3000

License Number: PA23310


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SA 8:00AM-5:00PM

American Sign Language (ASL): **NEIGHBORHOOD**

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

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### **NEIGHBORHOOD HEALTHCARE GOLD FAMILY HEALTH CENTER**

Provider ID: 481187

 13010 POWAY RD  
POWAY, CA 92064-4520

 Phone: 858-218-3000  
Fax: 360-462-2742

 After Hours Phone:  
858-218-3000

License Number: 550004321

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A


## **SAN DIEGO**

### **NORTH PARK FAMILY HEALTH CENTERS**


Provider ID: 206362

 3544 30TH ST

SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


Fax: 619-501-0627

 After Hours Phone:  
619-515-2424

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**

Provider ID: 517403

 316 25TH ST  
SAN DIEGO, CA 92102-3016


 Phone: 619-238-5551

 After Hours Phone:  
619-238-5551

License Number: A97270

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**

Provider ID: 517403

 316 25TH ST  
SAN DIEGO, CA 92102-3016

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: A156607

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### **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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦资质的健康诊所


License Number: G78814  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424


License Number: NP95002226  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424

License Number: NP95006792  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424


License Number: PA17220

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A169752

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A177373

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A177462

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A181809

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A46161

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A61687

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A68124

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: 20A20252

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A140646

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

3544 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A147758

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

3544 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

3544 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 206362

3544 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A180044

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424


License Number: A51318

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

License Number: A164859  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM



American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424

License Number: A178499  
NPI: 1134155377



Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424

License Number: A118095  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**



Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424

License Number: A126181


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A132576

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **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 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ibclinic.org](http://www.ibclinic.org)

### **NESTOR COMMUNITY HEALTH CENTER**

Provider ID: 214492

1016 OUTER RD  
SAN DIEGO, CA 92154-1351

Phone: 619-429-3733

After Hours Phone:  
619-429-3733

License Number: A165398

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish






















Cultural Competency: No

Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

- N**  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.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 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL):*
- N**  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ibclinic.org*
- 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: NP22031*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
 *Site Languages(s) Spoken: Spanish*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL):*
- N**  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ibclinic.org*
- NESTOR COMMUNITY HEALTH CENTER**  
*Provider ID: 214492*  
 1016 OUTER RD  
SAN DIEGO, CA 92154-1351  
 *Phone: 619-429-3733*  
*Fax: 619-628-5550*  
 *After Hours Phone: 619-429-3733*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
 *Site Languages(s) Spoken: Spanish*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL):*
- 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*

*N*


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 206360*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

*License Number: 20A12653*

*NPI: 1134155377*

*Accepting New Patients: Yes*


*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*


 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 206360*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

*License Number: 20A12732*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 206360*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*


*License Number: 20A14919*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):*

*N*


 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 206360*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 *Phone: 619-515-2300*

 *After Hours Phone: 619-515-2300*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

License Number: 20A15743  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N




 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: 20A17072  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N




 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: 20A17478  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT




PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: A103099  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A72005

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

3514 30TH ST  
SAN DIEGO, CA 92104-4120

Phone: 619-515-2424

After Hours Phone:  
619-515-2424

License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: NP95013978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone:  
619-515-2424


License Number: PA21042

NPI: 1134155377

Accepting New Patients: Yes























Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p>TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></p>	<p><b>KING CHAVEZ HEALTH CENTER</b></p> <p>Provider ID: 451167</p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114-6201</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: 20A7435 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></p>	<p>SAN DIEGO, CA 92114-6201</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: 20A8204 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA</p> <p> Website: <a href="http://www.ihpsocal.org">www.ihpsocal.org</a></p>
<p><b>KING CHAVEZ HEALTH CENTER</b></p> <p>Provider ID: 451167</p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114-6201</p> <p> Phone: 619-428-4463</p> <p> After Hours Phone: 619-428-4463</p> <p>License Number: G71855 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes Cultural Competency: No</p> <p> Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT</p>	<p><b>KING CHAVEZ HEALTH CENTER</b></p> <p>Provider ID: 451167</p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114-6201</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A101017 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p>	<p><b>KING CHAVEZ HEALTH CENTER</b></p> <p>Provider ID: 451167</p> <p> 950 S EUCLID AVE SAN DIEGO, CA 92114-6201</p> <p> Phone: 619-662-4100</p> <p> After Hours Phone: 619-662-4100</p> <p>License Number: A101017 NPI: 1598122871</p> <p>Accepting New Patients: Yes Min/Max Age: 0\None</p> <p> Site English Spoken: Yes</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **KING CHAVEZ HEALTH CENTER**

*Provider ID: 451167*

 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A125329*


*NPI: 1598122871*

*Accepting New Patients: Yes*


*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **KING CHAVEZ HEALTH CENTER**

*Provider ID: 451167*

 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201

 *Phone: 619-662-4100*

 *After Hours Phone:  
619-662-4100*

*License Number: A134995*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### **NORTH PARK FAMILY HEALTH CENTERS**

*Provider ID: 206362*

 3544 30TH ST  
SAN DIEGO, CA 92104-4120

 *Phone: 619-515-2424*

 *After Hours Phone:  
619-515-2424*

*License Number: 20A14794*


*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

*Cultural Competency: No*

 *Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO*

 *Website: www.fhcsd.org*


### **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*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM


SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS


Provider ID: 416831

 3514 30TH ST

SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

Fax: 619-683-7586

 After Hours Phone: 619-515-2424

License Number: 90000469


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM


TH 8:00AM-5:00PM

FR 8:00AM-5:00PM


SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 206362

 3544 30TH ST

SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424


 After Hours Phone: 619-515-2424

License Number: 20A11535


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone: 619-515-2300

License Number: A114181


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER


Provider ID: 206360


 1809 NATIONAL AVE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: A120043

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A121451

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A122238

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:

619-515-2300

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A142703

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A146111

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM



American Sign Language (ASL):

N






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*






### LOGAN HEIGHTS FAMILY HEALTH CENTER

*Provider ID: 206360*  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 *Phone: 619-515-2300*  
 *After Hours Phone: 619-515-2300*  
*License Number: A146838*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*


*American Sign Language (ASL):*  
N


 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*

### NORTH PARK FAMILY HEALTH CENTERS

*Provider ID: 206362*  
 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*  
*License Number: 20A14919*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*


 *Website: www.fhcsd.org*

### NORTH PARK FAMILY HEALTH CENTERS


*Provider ID: 206362*  
 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*

*License Number: 20A15068*  
*NPI: 1134155377*

*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*



 *Website: www.fhcsd.org*

### NORTH PARK FAMILY HEALTH CENTERS

*Provider ID: 206362*  
 3544 30TH ST  
SAN DIEGO, CA 92104-4120  
 *Phone: 619-515-2424*  
 *After Hours Phone: 619-515-2424*

*License Number: 20A15413*  
*NPI: 1134155377*

*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### 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 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: G72486

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A


### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500


License Number: NP10769

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: PA54617

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

🕒 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

🌐 *Website: N/A*

### **OPERATION SAMAHAN RANCHO PENASQUITOS**

*Provider ID: 418535*

📍 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129-2889

☎ *Phone: 844-200-2426*

*Fax: 858-695-9074*

🕒 *After Hours Phone: 844-200-2426*

*License Number: 550003857*

*NPI: 1801907449*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

🗨 *Site English Spoken: yes*

🗨 *Site Languages(s) Spoken: Spanish*

*Cultural Competency: No*

🕒 *Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM*

*TH 8:30AM-5:30PM*

*FR 8:30AM-5:30PM*

*SA 8:30AM-5:30PM*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA:*

*OPERATION SAMAHAN*

🌐 *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: A147939*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

🗨 *Site English Spoken: Yes  
Cultural Competency: No*

🕒 *Hours: SU 9:00AM-5:00PM*

*MO 9:00AM-5:00PM*

*TU 9:00AM-5:00PM*

*WE 9:00AM-5:00PM*

*TH 9:00AM-5:00PM*

*FR 9:00AM-5:00PM*

*SA 9:00AM-5:00PM*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY*

*HEALTH CENTERS OF SAN DIEGO*

🌐 *Website: www.fhcsd.org*

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**

*Provider ID: 206360*

📍 1809 NATIONAL AVE SAN DIEGO, CA 92113-2113

☎ *Phone: 619-515-2300*

🕒 *After Hours Phone: 619-515-2300*

*License Number: A148014*

*NPI: 1134155377*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

🗨 *Site English Spoken: Yes  
Cultural Competency: No*

🕒 *Hours: SU 9:00AM-5:00PM*

*MO 9:00AM-5:00PM*

*TU 9:00AM-5:00PM*

*WE 9:00AM-5:00PM*

*TH 9:00AM-5:00PM*

*FR 9:00AM-5:00PM*

*SA 9:00AM-5:00PM*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*

🌐 *Website: www.fhcsd.org*

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**


*Provider ID: 206360*


📍 1809 NATIONAL AVE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A151631

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)


### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### 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  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A163183

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:

619-515-2300

License Number: A163978

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: A164889

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM






American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*




### **KING CHAVEZ HEALTH CENTER**



*Provider ID: 451167*  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 *Phone: 619-662-4100*  
*Fax: 619-662-4158*  
 *After Hours Phone: 619-662-4100*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
N



 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*

### **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 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
N



 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*

### **KING CHAVEZ HEALTH CENTER**





*Provider ID: 451167*  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: NP8563*

*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*

### **KING CHAVEZ HEALTH CENTER**






*Provider ID: 451167*  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: DC27523*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### KING CHAVEZ HEALTH CENTER

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A153223  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM



American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA



 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### KING CHAVEZ HEALTH CENTER

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100





License Number: A165432  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM






American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### KING CHAVEZ HEALTH CENTER

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:

619-662-4100  
License Number: A45942  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### KING CHAVEZ HEALTH CENTER






Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A96919  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### KING CHAVEZ HEALTH CENTER

Provider ID: 451167  
 950 S EUCLID AVE  
SAN DIEGO, CA 92114-6201  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A79383  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535  
 9995 CARMEL MOUNTAIN RD STE B10 AND B11  
SAN DIEGO, CA 92129-2889  
 Phone: 844-200-2426  
 After Hours Phone:  
844-200-2426  
License Number: DC15775  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\None


Site English Spoken: yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535  
 9995 CARMEL MOUNTAIN RD STE B10 AND B11  
SAN DIEGO, CA 92129-2889  
 Phone: 844-200-2426  
 After Hours Phone:  
844-200-2426  
License Number: DC29074  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### OPERATION SAMAHAN RANCHO PENASQUITOS




Provider ID: 418535  
 9995 CARMEL MOUNTAIN




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## B. 联邦合资质的健康诊所




RD STE B10 AND B11  
SAN DIEGO, CA  
92129-2889  
 Phone: 844-200-2426  
 After Hours Phone:  
844-200-2426  
License Number: NP22974  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>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: NP95003211  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>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 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: [www.operationsa  
mahan.org](http://www.operationsa<br/>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  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA:


OPERATION SAMAHAN

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


### OPERATION SAMAHAN RANCHO PENASQUITOS

Provider ID: 418535

 9995 CARMEL MOUNTAIN  
RD STE B10 AND B11  
SAN DIEGO, CA  
92129-2889

 Phone: 844-200-2426

Fax: 858-695-9074

 After Hours Phone:  
844-200-2426

License Number: 550002478

NPI: 1801907449


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM


SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:


OPERATION SAMAHAN

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)

### SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A112379

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100


License Number: A120447

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH CHC - OCEAN VIEW

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
619-662-4100  
*License Number:* A120576  
*NPI:* 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
🌐 *Website:* www.ihpsocal.org

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

*Provider ID:* 227409  
📍 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
☎ *Phone:* 619-662-4100  
☎ *After Hours Phone:*  
619-662-4100  
*License Number:* A153414  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-5:00PM

MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
🌐 *Website:* www.ihpsocal.org

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

*Provider ID:* 227409  
📍 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
☎ *Phone:* 619-662-4100  
☎ *After Hours Phone:*  
619-662-4100  
*License Number:* A157505  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
🌐 *Website:* www.ihpsocal.org

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

*Provider ID:* 227409  
📍 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
☎ *Phone:* 619-662-4100  
☎ *After Hours Phone:*  
619-662-4100  
*License Number:* A162332  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* yes  
*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
🌐 *Website:* www.ihpsocal.org


*Website:* www.ihpsocal.org

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

*Provider ID:* 227409  
📍 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: A78373


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C54198


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: C55180


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432

 Phone: 619-662-4100

Fax: 619-858-1003

 After Hours Phone:  
619-662-4100


License Number: A88893

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

Provider ID: 227409

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100

License Number: DC33300

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH CHC - OCEAN VIEW**

Provider ID: 227409

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113-1432  
 Phone: 619-662-4100  
Fax: 619-595-0258

 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**

Provider ID: 517403

 316 25TH ST  
SAN DIEGO, CA 92102-3016  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100

License Number: NP20849

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### **SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE**

Provider ID: 517403


 316 25TH ST  
SAN DIEGO, CA 92102-3016  
 Phone: 619-662-4100  
Fax: 619-238-3807


 After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH**

#### **COMMUNITY HEIGHTS FAMILY MED**

Provider ID: 517998

4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH**

#### **COMMUNITY HEIGHTS FAMILY MED**

Provider ID: 517998

4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: NP95005999

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH**

#### **COMMUNITY HEIGHTS FAMILY MED**

Provider ID: 517998

4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 20A7502

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### **SAN YSIDRO HEALTH**

#### **COMMUNITY HEIGHTS FAMILY MED**

Provider ID: 517998

4690 EL CAJON BLVD  
SAN DIEGO, CA 92115-4403

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: 550003882

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268  
4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608  
Phone: 619-255-9154  
After Hours Phone:  
619-255-9154  
License Number: A123929  
NPI: 1609849074

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608  
Phone: 619-255-9155  
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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608  
Phone: 619-255-9154  
After Hours Phone:  
619-255-9154

License Number: A163693

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA  
MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608  
Phone: 619-255-9155  
After Hours Phone:  
619-255-9155

License Number: A111170

NPI: 1609849074



Accepting New Patients: Yes

Min/Max Age: 0\None






Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medical。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


SA 8:00AM-5:00PM  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268  
 4060 FAIRMOUNT AVE  
 SAN DIEGO, CA 92105-1608  
 Phone: 619-255-9155  
 After Hours Phone: 619-255-9155  
 License Number: A75533  
 NPI: 1609849074  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM




American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)



g  
**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 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)






### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583  
 1501 IMPERIAL AVE  
 SAN DIEGO, CA 92101-7638  
 Phone: 619-233-8500

 After Hours Phone: 619-233-8500  
 License Number: A109828  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
 MO 8:00AM-5:30PM  
 TU 8:00AM-5:30PM  
 WE 8:00AM-5:30PM  
 TH 8:00AM-5:30PM  
 FR 8:00AM-5:30PM  
 SA 8:00AM-5:30PM

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER


Provider ID: 403583  
 1501 IMPERIAL AVE  
 SAN DIEGO, CA 92101-7638  
 Phone: 619-233-8500  
 After Hours Phone: 619-233-8500  
 License Number: A115598  
 NPI: 1598122871  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500


License Number: A136275

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

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 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500


License Number: A54702

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500


 After Hours Phone:  
619-233-8500

License Number: A60801

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500


 After Hours Phone:  
619-233-8500

License Number: A67762

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: A82123

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A


### 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 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A

### ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER

Provider ID: 403583

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638

 Phone: 619-233-8500

 After Hours Phone:  
619-233-8500

License Number: G29879

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: yes


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*


 *Website: N/A*

### **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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM*

*American Sign Language (ASL):  
N*


 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA:  
OPERATION SAMAHAN*

 *Website: www.operationsa  
mahan.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*

*License Number: 80000146*

*NPI: 1801907449*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog*


*Cultural Competency: No*

 *Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*


*Medical Group/IPA:  
OPERATION SAMAHAN*


 *Website: www.operationsa  
mahan.org*

### **OPERATION SAMAHAN - MIRA MESA**

*Provider ID: 432308*

 *9855 ERMA RD STE 105  
SAN DIEGO, CA 92131-1007*

 *Phone: 844-200-2426*

 *After Hours Phone:  
844-200-2426*

*License Number: NP95010585*

*NPI: 1801907449*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

*Site English Spoken: yes*

*Site Languages(s) Spoken:  
Spanish, Tagalog*


*Cultural Competency: No*

 *Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

*Medical Group/IPA:  
OPERATION SAMAHAN*

 *Website: www.operationsa  
mahan.org*

### **ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER**

*Provider ID: 403583*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101-7638  
 Phone: 619-233-8500  
 After Hours Phone:  
619-233-8500



License Number: A104052  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: N/A




### 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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: www.operationsa  
mahan.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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: www.operationsa  
mahan.org



### OPERATION SAMAHAN - MIRA MESA

Provider ID: 432308  
 9855 ERMA RD STE 105  
SAN DIEGO, CA 92131-1007  
 Phone: 844-200-2426  
Fax: 858-536-8034  
 After Hours Phone:  
844-200-2426

License Number: 80000146  
NPI: 1801907449  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA:  
OPERATION SAMAHAN  
 Website: www.operationsa

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

mahan.org

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-798-3947

After Hours Phone:  
619-798-3947

License Number: DC32800

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: www.lamaestra.org

### OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126-2375

Phone: 844-200-2426

After Hours Phone:  
844-200-2426

License Number: A161105

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsa  
mahan.org

### OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101

10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126-2375

Phone: 844-200-2426

After Hours Phone:  
844-200-2426

License Number: C54941

NPI: 1801907449

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: No

Hours: SU 8:00AM-4:30PM  
MO 8:00AM-4:30PM  
TU 8:00AM-4:30PM  
WE 8:00AM-4:30PM  
TH 8:00AM-4:30PM  
FR 8:00AM-4:30PM  
SA 8:00AM-4:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA:

OPERATION SAMAHAN

Website: www.operationsa  
mahan.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 8:00AM-4:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medical。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所





MO 8:00AM-4:30PM  
 TU 8:00AM-4:30PM  
 WE 8:00AM-4:30PM  
 TH 8:00AM-4:30PM  
 FR 8:00AM-4:30PM  
 SA 8:00AM-4:30PM  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA:  
 OPERATION SAMAHAN  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


### OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101  
 10737 CAMINO RUIZ STE 235  
 SAN DIEGO, CA 92126-2375  
 Phone: 844-200-2426  
 After Hours Phone: 844-200-2426  
 License Number: NP95003211  
 NPI: 1801907449  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: yes  
 Site Languages(s) Spoken: Spanish, Tagalog  
 Cultural Competency: No  
 Hours: SU 8:00AM-4:30PM  
 MO 8:00AM-4:30PM  
 TU 8:00AM-4:30PM  
 WE 8:00AM-4:30PM  
 TH 8:00AM-4:30PM  
 FR 8:00AM-4:30PM  
 SA 8:00AM-4:30PM





American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA:  
 OPERATION SAMAHAN  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


### OPERATION SAMAHAN - MIRA MESA

Provider ID: 417101  
 10737 CAMINO RUIZ STE 235  
 SAN DIEGO, CA 92126-2375  
 Phone: 844-200-2426  
 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 8:00AM-4:30PM  
 MO 8:00AM-4:30PM  
 TU 8:00AM-4:30PM  
 WE 8:00AM-4:30PM  
 TH 8:00AM-4:30PM  
 FR 8:00AM-4:30PM  
 SA 8:00AM-4:30PM

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA:

### 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: DC28966  
 NPI: 1609849074  
 Accepting New Patients: Yes  
 Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM



American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Medical Group/IPA: LA MAESTRA FAMILY CLINIC  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268  
 4060 FAIRMOUNT AVE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p>SAN DIEGO, CA 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</p>	<p> Site English Spoken: Yes            Cultural Competency: No   Hours: SU 8:00AM-5:00PM            MO 8:00AM-5:00PM            TU 8:00AM-5:00PM            WE 8:00AM-5:00PM            TH 8:00AM-5:00PM            FR 8:00AM-5:00PM            SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL):            N   Accessibility: CONTACT PROVIDER            Medical Group/IPA: LA MAESTRA FAMILY CLINIC   Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>
<p> Site English Spoken: Yes            Cultural Competency: No   Hours: SU 8:00AM-5:00PM            MO 8:00AM-5:00PM            TU 8:00AM-5:00PM            WE 8:00AM-5:00PM            TH 8:00AM-5:00PM            FR 8:00AM-5:00PM            SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL):            N   Accessibility: CONTACT PROVIDER            Medical Group/IPA: LA MAESTRA FAMILY CLINIC   Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>	<p><b>LA MAESTRA FAMILY CLINIC INC</b>            Provider ID: 185268   4060 FAIRMOUNT AVE            SAN DIEGO, CA 92105-1608   Phone: 619-255-9155   After Hours Phone:            619-255-9155            License Number: PA13694            NPI: 1609849074            Accepting New Patients: Yes            Min/Max Age: 0\None</p>
<p>American Sign Language (ASL):            N   Accessibility: CONTACT PROVIDER            Medical Group/IPA: LA MAESTRA FAMILY CLINIC   Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>	<p><b>LA MAESTRA FAMILY CLINIC INC</b>            Provider ID: 185268   4060 FAIRMOUNT AVE            SAN DIEGO, CA 92105-1608   Phone: 619-255-9155   After Hours Phone:            619-255-9155            License Number: NP95013257            NPI: 1609849074            Accepting New Patients: Yes            Min/Max Age: 0\None</p>	<p> Site English Spoken: Yes            Cultural Competency: No   Hours: SU 8:00AM-5:00PM            MO 8:00AM-5:00PM            TU 8:00AM-5:00PM            WE 8:00AM-5:00PM            TH 8:00AM-5:00PM            FR 8:00AM-5:00PM            SA 8:00AM-5:00PM</p>
<p><b>LA MAESTRA FAMILY CLINIC INC</b>            Provider ID: 185268   4060 FAIRMOUNT AVE            SAN DIEGO, CA 92105-1608   Phone: 619-255-9155   After Hours Phone:            619-255-9155            License Number: G87837            NPI: 1609849074            Accepting New Patients: Yes            Min/Max Age: 0\None</p>	<p> Site English Spoken: Yes            Cultural Competency: No   Hours: SU 8:00AM-5:00PM            MO 8:00AM-5:00PM            TU 8:00AM-5:00PM            WE 8:00AM-5:00PM            TH 8:00AM-5:00PM            FR 8:00AM-5:00PM            SA 8:00AM-5:00PM</p>	<p>American Sign Language (ASL):            N   Accessibility: CONTACT PROVIDER            Medical Group/IPA: LA MAESTRA FAMILY CLINIC   Website: <a href="http://www.lamaestra.org">www.lamaestra.org</a></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

After Hours Phone:  
619-255-9155

License Number: PA21625

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

Fax: 619-284-4731

After Hours Phone:  
619-255-9155

License Number: 20A6433

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-255-9155

Fax: 619-749-5480

After Hours Phone:  
619-255-9155

License Number: A81682

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: LA

MAESTRA FAMILY CLINIC

Website: [www.lamaestra.org](http://www.lamaestra.org)

### LA MAESTRA FAMILY CLINIC INC

Provider ID: 185268

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105-1608

Phone: 619-280-7072

After Hours Phone:  
619-280-7072

License Number: 20A14222

NPI: 1609849074

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No



























Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

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## B. 联邦合资质的健康诊所


<p>N   <i>Accessibility: CONTACT PROVIDER</i>  <i>Medical Group/IPA: LA MAESTRA FAMILY CLINIC</i>   <i>Website: www.lamaestra.org</i></p>	<p><b>SHERMAN HEIGHTS FAMILY HLTH CTRS INC</b>  <i>Provider ID: 356145</i>   2391 ISLAND AVE            SAN DIEGO, CA 92102-2941   <i>Phone: 619-515-2435</i>   <i>After Hours Phone: 619-515-2435</i></p>	<p><i>License Number: A97036</i>  <i>NPI: 1134155377</i>  <i>Accepting New Patients: Yes</i>  <i>Min/Max Age: 0\None</i>   <i>Site English Spoken: yes</i>  <i>Cultural Competency: No</i>   <i>Hours: SU 9:00AM-5:00PM</i>  <i>MO 9:00AM-5:00PM</i>  <i>TU 9:00AM-5:00PM</i>  <i>WE 9:00AM-5:00PM</i>  <i>TH 9:00AM-5:00PM</i>  <i>FR 9:00AM-5:00PM</i>  <i>SA 9:00AM-5:00PM</i></p>
<p><b>LA MAESTRA FAMILY CLINIC INC</b>  <i>Provider ID: 185268</i>   4060 FAIRMOUNT AVE            SAN DIEGO, CA 92105-1608   <i>Phone: 619-564-8765</i>   <i>After Hours Phone: 619-564-8765</i>  <i>License Number: NP95009891</i>  <i>NPI: 1609849074</i>  <i>Accepting New Patients: Yes</i>  <i>Min/Max Age: 0\None</i>   <i>Site English Spoken: Yes</i>  <i>Cultural Competency: No</i>   <i>Hours: SU 8:00AM-5:00PM</i>  <i>MO 8:00AM-5:00PM</i>  <i>TU 8:00AM-5:00PM</i>  <i>WE 8:00AM-5:00PM</i>  <i>TH 8:00AM-5:00PM</i>  <i>FR 8:00AM-5:00PM</i>  <i>SA 8:00AM-5:00PM</i>  <i>American Sign Language (ASL):</i></p>	<p><i>License Number: A80504</i>  <i>NPI: 1134155377</i>  <i>Accepting New Patients: Yes</i>  <i>Min/Max Age: 0\None</i>   <i>Site English Spoken: yes</i>  <i>Cultural Competency: No</i>   <i>Hours: SU 9:00AM-5:00PM</i>  <i>MO 9:00AM-5:00PM</i>  <i>TU 9:00AM-5:00PM</i>  <i>WE 9:00AM-5:00PM</i>  <i>TH 9:00AM-5:00PM</i>  <i>FR 9:00AM-5:00PM</i>  <i>SA 9:00AM-5:00PM</i>  <i>American Sign Language (ASL):</i></p>	<p><i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i>  <i>Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO</i>   <i>Website: N/A</i></p>
<p>N   <i>Accessibility: CONTACT PROVIDER</i>  <i>Medical Group/IPA: LA MAESTRA FAMILY CLINIC</i>   <i>Website: www.lamaestra.org</i></p>	<p><b>SHERMAN HEIGHTS FAMILY HLTH CTRS INC</b>  <i>Provider ID: 356145</i>   2391 ISLAND AVE            SAN DIEGO, CA 92102-2941   <i>Phone: 619-515-2435</i>   <i>After Hours Phone: 619-515-2435</i></p>	<p><b>SHERMAN HEIGHTS FAMILY HLTH CTRS INC</b>  <i>Provider ID: 356145</i>   2391 ISLAND AVE            SAN DIEGO, CA 92102-2941   <i>Phone: 619-515-2435</i>   <i>After Hours Phone: 619-515-2435</i>  <i>License Number: NP95011254</i>  <i>NPI: 1134155377</i>  <i>Accepting New Patients: Yes</i>  <i>Min/Max Age: 0\None</i>   <i>Site English Spoken: yes</i>  <i>Cultural Competency: No</i>   <i>Hours: SU 9:00AM-5:00PM</i>  <i>MO 9:00AM-5:00PM</i></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435

 After Hours Phone:  
619-515-2435


License Number: PA16245

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: N/A

### SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435

 After Hours Phone:  
619-515-2435

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A


### SHERMAN HEIGHTS FAMILY HLTH CTRS INC

Provider ID: 356145

 2391 ISLAND AVE  
SAN DIEGO, CA 92102-2941

 Phone: 619-515-2435


Fax: 619-515-2435

 After Hours Phone:  
619-515-2435

NPI: 1134155377


Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: N/A

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-263-2499

 After Hours Phone:  
619-263-2499

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

License Number: 20A7241

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:  
619-515-2420


License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:  
619-515-2420

License Number: A113001

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


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## B. 联邦合资质的健康诊所

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2420

 After Hours Phone:  
619-515-2420

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: 20A13745

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: 20A14772

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

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## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: 20A15471

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A113448


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A114181


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: A115598

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM


American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

License Number: A119689

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: A126187

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A137260

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: A140912

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: A141057

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560

License Number: A142743

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: A161373

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所


**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700

License Number: C174985

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700

License Number: G41532

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700

License Number: G70886

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700

License Number: NP16433

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: yes

Site Languages(s) Spoken:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Lithuanian, Vietnamese, Spanish, Chinese*

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

☎ Phone: 858-810-8700

🕒 After Hours Phone:  
858-810-8700

License Number: NP23847

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: yes

☐ Site Languages(s) Spoken:  
*Lithuanian, Vietnamese, Spanish, Chinese*

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO AMERICAN INDIAN HEALTH CENTER**

Provider ID: 207382

📍 2630 1ST AVE  
SAN DIEGO, CA  
92103-6599

☎ Phone: 619-234-2158

Fax: 619-234-0206

🕒 After Hours Phone:  
619-234-2158

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: yes

☐ Site Languages(s) Spoken:  
*Korean, Spanish, Hindi*

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.sdaihc.org](http://www.sdaihc.org)

### **SAN DIEGO AMERICAN INDIAN HEALTH CENTER**

Provider ID: 207382

📍 2630 1ST AVE  
SAN DIEGO, CA  
92103-6599

☎ Phone: 619-234-2158

Fax: 619-234-0206

🕒 After Hours Phone:  
619-234-2158

License Number: 90000168

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

☐ Site English Spoken: yes

☐ Site Languages(s) Spoken:  
*Korean, Spanish, Hindi*

Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

🌐 Website: [www.sdaihc.org](http://www.sdaihc.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

After Hours Phone:  
858-279-0925

License Number: A119010

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

After Hours Phone:  
858-279-0925

License Number: A144372

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

After Hours Phone:  
858-279-0925

License Number: C174985

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

After Hours Phone:  
858-279-0925

License Number: DPM4434

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

☎ Phone: 858-279-0925

🕒 After Hours Phone:  
858-279-0925

License Number: G41532

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

☎ Phone: 858-279-0925

🕒 After Hours Phone:  
858-279-0925

License Number: G44807

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

SOUTHERN CALIFORNIA

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

📍 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

☎ Phone: 858-279-0925

Fax: 858-279-0377

🕒 After Hours Phone:  
858-279-0925

License Number: A93812

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### 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 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD

SAN DIEGO, CA 92111-6342

Phone: 858-279-0925

Fax: 858-633-4680

After Hours Phone:  
858-279-0925

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### LINDA VISTA HEALTH CARE CTR

Provider ID: 206046

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111-6342

Phone: 858-810-8700

After Hours Phone:  
858-810-8700

License Number: 20A12402

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Site Languages(s) Spoken:  
Vietnamese, Spanish,  
Chinese, Lithuanian

Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### MID-CITY COMMUNITY CLINIC

Provider ID: 233597

4290 POLK AVE  
SAN DIEGO, CA 92105-1524

Phone: 619-563-0250

After Hours Phone:  
619-563-0250

License Number: 20A7662

NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None




Site English Spoken: Yes  
Cultural Competency: No


Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所




WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


**MID-CITY COMMUNITY CLINIC**  
Provider ID: 233597  
 4290 POLK AVE  
SAN DIEGO, CA 92105-1524  
 Phone: 619-563-0250  
 After Hours Phone:  
619-563-0250  
License Number: A112176  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM




American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA



 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)




**MID-CITY COMMUNITY CLINIC**  
Provider ID: 233597  
 4290 POLK AVE  
SAN DIEGO, CA 92105-1524  
 Phone: 619-563-0250  
 After Hours Phone:  
619-563-0250  
License Number: A163512  
NPI: 1598122871  
Accepting New Patients: Yes


Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

**MID-CITY COMMUNITY CLINIC**  
Provider ID: 233597  
 4290 POLK AVE  
SAN DIEGO, CA 92105-1524  
 Phone: 619-563-0250  
 After Hours Phone:  
619-563-0250





License Number: A175116  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

**MID-CITY COMMUNITY CLINIC**  
Provider ID: 233597  
 4290 POLK AVE  
SAN DIEGO, CA 92105-1524  
 Phone: 619-563-0250  
 After Hours Phone:  
619-563-0250  
License Number: DPM4434  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>	 After Hours Phone: 619-280-2058 License Number: A152267 NPI: 1598122871
American Sign Language (ASL): N	<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532	Accepting New Patients: Yes Min/Max Age: 0\None
 Accessibility: CONTACT PROVIDER	 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690	 Site English Spoken: Yes Cultural Competency: No
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 Phone: 619-280-2058	 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM
 Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>	 After Hours Phone: 619-280-2058 License Number: A112176 NPI: 1598122871	American Sign Language (ASL): N
<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233597	 Site English Spoken: Yes Cultural Competency: No	 Accessibility: CONTACT PROVIDER
 4290 POLK AVE SAN DIEGO, CA 92105-1524	 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA
 Phone: 619-563-0250	American Sign Language (ASL): N	 Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>
 After Hours Phone: 619-563-0250 License Number: G60630 NPI: 1598122871	 Site English Spoken: Yes Cultural Competency: No	<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532
Accepting New Patients: Yes Min/Max Age: 0\None	 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690
 Site English Spoken: Yes Cultural Competency: No	Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 Phone: 619-280-2058
 Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 Website: <a href="http://www.sdfamilycare.org">www.sdfamilycare.org</a>	 After Hours Phone: 619-280-2058 License Number: A163512 NPI: 1598122871
American Sign Language (ASL): N	<b>MID-CITY COMMUNITY CLINIC</b> Provider ID: 233532	Accepting New Patients: Yes Min/Max Age: 0\None
 Accessibility: CONTACT PROVIDER	 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105-1690	 Site English Spoken: Yes Cultural Competency: No
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 Phone: 619-280-2058	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700


License Number: 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 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700


License Number: A119010

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### SAN DIEGO FAMILY CARE

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700


License Number: 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 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


### SAN DIEGO FAMILY CARE


Provider ID: 482070

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 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 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700


License Number: A72833

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700


License Number: A92173

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes

 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

### **SAN DIEGO FAMILY CARE**

Provider ID: 482070

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111-6307

 Phone: 858-810-8700

 After Hours Phone:  
858-810-8700


License Number: A94449

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: yes


 Site Languages(s) Spoken:  
Lithuanian, Vietnamese,  
Spanish, Chinese

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.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 8:00AM-5:00PM

MO 8:00AM-5:00PM


TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529

 2325 COMMERCIAL ST STE 1400

SAN DIEGO, CA 92113-1195

 Phone: 619-515-2422

 After Hours Phone: 619-515-2422

License Number: A122238


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM


American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

Fax: 619-794-2696

 After Hours Phone:  
619-515-2454


License Number: 550003556

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM

SA 8:30AM-5:30PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:  
619-515-2454

License Number: 20A12796

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142

 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:  
619-515-2454


License Number: 20A14772

NPI: 1134155377


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR SAN DIEGO-OAK PARK**

Provider ID: 418142


 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

 After Hours Phone:  
619-515-2454  
License Number: C174538  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM


American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR SAN DIEGO-OAK PARK

Provider ID: 418142


 5160 FEDERAL BLVD  
SAN DIEGO, CA 92105-5429

 Phone: 619-515-2454

 After Hours Phone:  
619-515-2454


License Number: PA58505  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782


 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368


 Phone: 619-515-2430

 After Hours Phone:  
619-515-2430


License Number: PA58826  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782


 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368


 Phone: 619-515-2430

Fax: 619-578-2410


 After Hours Phone:  
619-515-2430  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **DOWNTOWN FAMILY CTR AT CONNECTIONS**

Provider ID: 417782

1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368

Phone: 619-515-2430

Fax: 619-578-2410

After Hours Phone:  
619-515-2430

License Number: 550002251

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:

619-515-2426

License Number: 20A17577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: 20A19345

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HEALTH CTR IBARRA**

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: A145023

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: A173486

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: G149974

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: NP17838

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR IBARRA

Provider ID: 417987

4874 POLK AVE  
SAN DIEGO, CA  
92105-2026

Phone: 619-515-2426

After Hours Phone:  
619-515-2426

License Number: NP95004443

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None




Site English Spoken: Yes  
Cultural Competency: No



Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所



SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HEALTH CTR IBARRA**  
Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:  
619-515-2426  
License Number: PA21385  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None




 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO






 Website: [www.fhcsd.org](http://www.fhcsd.org)  
**FAMILY HEALTH CTR IBARRA**  
Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:  
619-515-2426  
License Number: PA58098  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HEALTH CTR IBARRA**  
Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:

619-515-2426  
License Number: PA58905  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HEALTH CTR IBARRA**  
Provider ID: 417987  
 4874 POLK AVE  
SAN DIEGO, CA  
92105-2026  
 Phone: 619-515-2426  
 After Hours Phone:  
619-515-2426  
License Number: PA59481  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)


### FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167



 140 ELM ST  
SAN DIEGO, CA 92101-2602  
 Phone: 619-515-2520  
Fax: 619-231-0431  
 After Hours Phone: 619-515-2520  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No




 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HEALTH CTR OF SDELM ST

Provider ID: 419167



 140 ELM ST  
SAN DIEGO, CA 92101-2602  
 Phone: 619-515-2520  
Fax: 619-231-0431  
 After Hours Phone: 619-515-2520  
License Number: 550002061  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC


Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2560  
 After Hours Phone: 619-515-2560


License Number: A163464  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2560  
 After Hours Phone: 619-515-2560

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: A164859  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2560  
 After Hours Phone: 619-515-2560

License Number: A164879  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM


TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)



### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2560  
 After Hours Phone: 619-515-2560

License Number: A178499  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC**

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715  
 Phone: 619-515-2560  
 After Hours Phone: 619-515-2560

License Number: A72005  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST  
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:  
619-515-2560

License Number: C174538

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST  
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:  
619-515-2560

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST  
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:  
619-515-2560

License Number: DC33150

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST  
SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:  
619-515-2560

License Number: G61394

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: MT2061555

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: NP10146

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: NP17362

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560


License Number: NP19911

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560

License Number: NP95001492

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: NP95005321

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:  
619-515-2560

License Number: NP95007000

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT 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

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

4725 MARKET ST

SAN DIEGO, CA 92102-4715

Phone: 619-515-2560

After Hours Phone:  
619-515-2560

License Number: NP95021154

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: PA20378

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: PA58081

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: PA58505

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560


 After Hours Phone:  
619-515-2560


License Number: PA60864

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

 After Hours Phone:  
619-515-2560

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

Fax: 619-263-2499

 After Hours Phone:  
619-515-2560

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DIAMOND NEIGHBORHOODS FAMILY HLTH CTRS INC

Provider ID: 206363

 4725 MARKET ST  
SAN DIEGO, CA 92102-4715

 Phone: 619-515-2560

Fax: 619-263-2499

 After Hours Phone:

619-515-2560

License Number: A100391


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### DOWNTOWN FAMILY CTR AT CONNECTIONS

Provider ID: 417782

 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101-4368

 Phone: 619-515-2430

 After Hours Phone:  
619-515-2430

License Number: 20A7147


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No



 Hours: SU 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。






## B. 联邦合资质的健康诊所

MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA




Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
Fax: 858-488-1394  
 After Hours Phone: 619-515-2444  
License Number: 80000115  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444  
License Number: NP95013978  
NPI: 1134155377




Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
Fax: 858-488-1394  
 After Hours Phone: 619-515-2444  
NPI: 1134155377


Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851  
 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104  
 Phone: 619-515-2444  
 After Hours Phone: 619-515-2444

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: DC20729


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **FAMILY HLTH CTR SAN**


#### **DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: DPM4819


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **FAMILY HLTH CTR SAN**


#### **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 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


### **FAMILY HLTH CTR SAN**


#### **DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD

SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:  
619-515-2444

License Number: NM1662


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A164859

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:  
619-515-2444


License Number: A178499

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:  
619-515-2444

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

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## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A72005


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A76785


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: C174771


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN


DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: C53623


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM



MO 8:30AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。







## B. 联邦合资质的健康诊所



TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL


Provider ID: 419529  
 2325 COMMERCIAL ST STE 1400  
SAN DIEGO, CA 92113-1195  
 Phone: 619-515-2422  
 After Hours Phone: 619-515-2422

License Number: PA53788  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529  
 2325 COMMERCIAL ST STE 1400  
SAN DIEGO, CA 92113-1195  
 Phone: 619-515-2422  
Fax: 619-269-0053  
 After Hours Phone: 619-515-2422  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR OF SD SAN DIEGO COMMERCIAL

Provider ID: 419529  
 2325 COMMERCIAL ST STE 1400  
SAN DIEGO, CA 92113-1195  
 Phone: 619-515-2422

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Fax: 619-269-0053

☎ After Hours Phone:  
619-515-2422

License Number: 550003113

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes  
Cultural Competency: No

🕒 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

🌐 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 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

🌐 Website: www.fhcsd.org

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

📍 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

☎ Phone: 619-515-2444

☎ After Hours Phone:  
619-515-2444

License Number: 20A11535

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes  
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

🌐 Website: www.fhcsd.org

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

📍 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

☎ Phone: 619-515-2444

☎ After Hours Phone:  
619-515-2444

License Number: 20A13060

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

☑ Site English Spoken: Yes  
Cultural Competency: No

🕒 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

🌐 Website: www.fhcsd.org


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medical。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444


License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444


License Number: A108228

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-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 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGO-BEACH AREA**

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444


 After Hours Phone:  
619-515-2444


License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM

MO 8:30AM-5:30PM

TU 8:30AM-5:30PM

WE 8:30AM-5:30PM

TH 8:30AM-5:30PM

FR 8:30AM-5:30PM

SA 8:30AM-5:30PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A116680

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A118095

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A154298


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGO-BEACH AREA

Provider ID: 402851

 3705 MISSION BLVD  
SAN DIEGO, CA 92109-7104

 Phone: 619-515-2444

 After Hours Phone:  
619-515-2444

License Number: A154399

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:  
619-515-2525

License Number: A128091

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:  
619-515-2525

License Number: A163977

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SAN DIEGOCITY COLLEGE

Provider ID: 417429

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713

 Phone: 619-515-2525

 After Hours Phone:  
619-515-2525

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: A76785  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGOCITY COLLEGE**



Provider ID: 417429

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713  
 Phone: 619-515-2525  
 After Hours Phone:  
619-515-2525

License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM

TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGOCITY COLLEGE**



Provider ID: 417429

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713  
 Phone: 619-515-2525  
 After Hours Phone:  
619-515-2525

License Number: NP95010814

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT



PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN DIEGOCITY COLLEGE**

Provider ID: 417429

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713  
 Phone: 619-515-2525  
 After Hours Phone:  
619-515-2525

License Number: PA22762

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SAN**

#### **DIEGOCITY COLLEGE**

Provider ID: 417429

1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

Fax: 619-501-5814

After Hours Phone:  
619-515-2525

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SAN**

#### **DIEGOCITY COLLEGE**

Provider ID: 417429

1550 BROADWAY STE 2  
SAN DIEGO, CA 92101-5713

Phone: 619-515-2525

Fax: 619-501-5814

After Hours Phone:

619-515-2525

License Number: 550002865

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:30PM  
MO 8:30AM-5:30PM  
TU 8:30AM-5:30PM  
WE 8:30AM-5:30PM  
TH 8:30AM-5:30PM  
FR 8:30AM-5:30PM  
SA 8:30AM-5:30PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD**

#### **HILLCREST**

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143

Phone: 619-515-2400

After Hours Phone:  
619-515-2400

License Number: 20A17836

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-9:00PM

MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD**

#### **HILLCREST**

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:  
619-515-2545

License Number: 20A11612

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None



Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM






American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*




### **FAMILY HLTH CTR SD HILLCREST**

*Provider ID: 417937*  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 *Phone: 619-515-2545*  
 *After Hours Phone: 619-515-2545*  
*License Number: 20A12504*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-9:00PM*  
*MO 8:00AM-9:00PM*  
*TU 8:00AM-9:00PM*  
*WE 8:00AM-9:00PM*  
*TH 8:00AM-9:00PM*  
*FR 8:00AM-9:00PM*  
*SA 8:00AM-9:00PM*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*


### **FAMILY HLTH CTR SD HILLCREST**


*Provider ID: 417937*  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 *Phone: 619-515-2545*  
 *After Hours Phone: 619-515-2545*  
*License Number: 20A14794*  
*NPI: 1134155377*

*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-9:00PM*  
*MO 8:00AM-9:00PM*  
*TU 8:00AM-9:00PM*  
*WE 8:00AM-9:00PM*  
*TH 8:00AM-9:00PM*  
*FR 8:00AM-9:00PM*  
*SA 8:00AM-9:00PM*



*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT 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: 20A15413*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-9:00PM*  
*MO 8:00AM-9:00PM*  
*TU 8:00AM-9:00PM*  
*WE 8:00AM-9:00PM*  
*TH 8:00AM-9:00PM*  
*FR 8:00AM-9:00PM*  
*SA 8:00AM-9:00PM*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*

### **FAMILY HLTH CTR SD HILLCREST**

*Provider ID: 417937*  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 *Phone: 619-515-2545*  
 *After Hours Phone: 619-515-2545*  
*License Number: 20A15459*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-9:00PM*  
*MO 8:00AM-9:00PM*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A17657

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: 20A17702

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545

License Number: 20A17926

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: 20A19399  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: A100333  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### **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 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: A119631  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: A136616

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: A140324

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545


License Number: A154708

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545

License Number: A169207

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM


American Sign Language (ASL):

N






 Accessibility: CONTACT

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## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**




Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: A171135  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)






**FAMILY HLTH CTR SD  
HILLCREST**  
Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: A177462  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SD  
HILLCREST**  
Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545

License Number: A180044  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

**FAMILY HLTH CTR SD  
HILLCREST**  
Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: A70175  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: A80153

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: A80461

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545

License Number: C52451

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: DC31024  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: DC33150  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: A72005  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: A76785  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A77126

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A80504

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A93385

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: A95577

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: A97036

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: C174771

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: DPM4819

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: DPM5661

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: DC33688

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: G16236

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545

License Number: G80316

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: NP18098  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: NP7374  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: NP95001899  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone: 619-515-2545

License Number: NP95005103  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: www.fhcsd.org


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: NP95005293

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545

License Number: PA21385

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545


License Number: PA23231

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **LOGAN HEIGHTS FAMILY HEALTH CENTER**

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300


License Number: G78814

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: G81658

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: NM792

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: NP10906


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: NP11778


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: NP17852

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: NP2286

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300


 After Hours Phone:  
619-515-2300

License Number: NP95000205

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦资质的健康诊所

License Number: A108228  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: www.fhcsd.org

### **NORTH PARK FAMILY HEALTH CENTERS**



Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424

License Number: A113001

NPI: 1134155377


Accepting New Patients: Yes  
Min/Max Age: 0\None


 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM

TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

### **NORTH PARK FAMILY HEALTH CENTERS**

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424

License Number: A114181

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

### **NORTH PARK FAMILY HEALTH CENTERS**



Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120  
 Phone: 619-515-2424  
 After Hours Phone: 619-515-2424

License Number: A116680


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95000602

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95001705

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:  
619-515-2545

License Number: PT12930

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

TU 8:00AM-9:00PM

WE 8:00AM-9:00PM

TH 8:00AM-9:00PM

FR 8:00AM-9:00PM

SA 8:00AM-9:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

4094 4TH AVE  
SAN DIEGO, CA 92103-2143

Phone: 619-515-2545

After Hours Phone:  
619-515-2545

License Number: PT25155

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM


American Sign Language (ASL):

N






Accessibility: CONTACT


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**



Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: PT28061  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM


American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: PT292351  
NPI: 1134155377



Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM


American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**




Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545



License Number: PT292613  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### **FAMILY HLTH CTR SD HILLCREST**

Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
 After Hours Phone:  
619-515-2545  
License Number: PT293536  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: PT295173

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT


PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

 After Hours Phone:  
619-515-2545


License Number: PT296559

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545


 After Hours Phone:  
619-515-2545

License Number: PT40975

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545



Fax: 619-501-9645

 After Hours Phone:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

619-515-2545  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM

American Sign Language (ASL):




N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### 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  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):




N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER



Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: NP95007253

NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT




PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

License Number: NP95011254


NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95011313

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95015780

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: NP95022452

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: www.fhcsd.org

### 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 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: PA15227

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: PA16245

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300


License Number: PA17864

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST

Provider ID: 417937

 4094 4TH AVE  
SAN DIEGO, CA 92103-2143

 Phone: 619-515-2545

Fax: 619-501-9645

 After Hours Phone:  
619-515-2545


License Number: 550003099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No



 Hours: SU 8:00AM-9:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。






## B. 联邦合资质的健康诊所

MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### FAMILY HLTH CTR SD HILLCREST




Provider ID: 417937  
 4094 4TH AVE  
SAN DIEGO, CA 92103-2143  
 Phone: 619-515-2545  
Fax: 619-501-9645  
 After Hours Phone: 619-515-2545  
License Number: A95356  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-9:00PM  
MO 8:00AM-9:00PM  
TU 8:00AM-9:00PM  
WE 8:00AM-9:00PM  
TH 8:00AM-9:00PM  
FR 8:00AM-9:00PM  
SA 8:00AM-9:00PM  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300  
License Number: PA20396  
NPI: 1134155377




Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM



American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)



### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300  
License Number: PA21591  
NPI: 1134155377




Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360  
 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113  
 Phone: 619-515-2300  
 After Hours Phone: 619-515-2300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

License Number: PA23258

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:

619-515-2300

License Number: PA53788

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:

619-515-2300

License Number: PA54661

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE

SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:

619-515-2300

License Number: PA61677

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY

HEALTH CENTERS OF SAN

DIEGO

Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: PT295463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: PT30272

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: PT33914

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

Phone: 619-515-2300

After Hours Phone:  
619-515-2300

License Number: RN486421

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N


Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

### PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: RN810863

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

 After Hours Phone:  
619-515-2300

License Number: SP27677

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No


 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### LOGAN HEIGHTS FAMILY HEALTH CENTER

Provider ID: 206360

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113-2113

 Phone: 619-515-2300

Fax: 619-515-2510

 After Hours Phone:

619-515-2300

License Number: A178494


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER


Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424

License Number: 20A11535


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所


MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: 20A14919

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### NORTH PARK FAMILY HEALTH CENTERS

Provider ID: 416831

 3514 30TH ST  
SAN DIEGO, CA 92104-4120

 Phone: 619-515-2424

 After Hours Phone:  
619-515-2424


License Number: A103099

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

## SAN MARCOS


### 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 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450

 Phone: 760-736-6767

Fax: 760-736-6744

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
760-736-6767

*License Number:* NP18788  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 625875

📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450

☎ *Phone:* 760-736-6767  
*Fax:* 760-736-6744

☎ *After Hours Phone:*  
760-736-6767

*License Number:* PA17718  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 614511

📍 1595 GRAND AVE STE 106  
SAN MARCOS, CA  
92078-2450

☎ *Phone:* 760-736-6767  
*Fax:* 760-736-6744

☎ *After Hours Phone:*  
760-736-6767

*License Number:* 80000167  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 614511

📍 1595 GRAND AVE STE 106  
SAN MARCOS, CA  
92078-2450

☎ *Phone:* 760-736-6767  
*Fax:* 760-736-6744

☎ *After Hours Phone:*  
760-736-6767

*License Number:* C54157  
*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☑ *Site English Spoken:* Yes  
*Cultural Competency:* No

🕒 *Hours:* SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT  
PROVIDER

*Medical Group/IPA:* IHP OF  
SOUTHERN CALIFORNIA

🌐 *Website:* www.ihpsocal.org

### TRUECARE

*Provider ID:* 625875

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

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 Language(s) Spoken:  
Spanish

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

Phone: 760-736-6767

After Hours Phone:  
760-736-6767

License Number: G74757

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450

Phone: 760-520-8200

Fax: 360-462-2749

After Hours Phone:  
760-520-8200

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92078-2450

Phone: 760-520-8200

Fax: 360-462-2749

After Hours Phone:  
760-520-8200

License Number: 80000167

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: PA19825

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: PA21723

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: PA22667

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: PA51867

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish































Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

































## B. 联邦合资质的健康诊所

FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 Website: www.ihpsocal.org After Hours Phone: 760-736-6767 License Number: NP95002545 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767 Fax: 760-736-8740  After Hours Phone: 760-736-6767 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: PA17101 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: NP95003903 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes	<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767































了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 <i>Site Languages(s) Spoken:</i> Spanish	FR 8:00AM-5:00PM SA 8:00AM-5:00PM	 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>
<i>Cultural Competency:</i> No	<i>American Sign Language (ASL):</i>	<b>TRUECARE</b>
 <i>Hours:</i> SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM	N	<i>Provider ID:</i> 625875
<i>American Sign Language (ASL):</i>	 <i>Accessibility:</i> CONTACT PROVIDER	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973
N	<i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA	 <i>Phone:</i> 760-736-6767
 <i>Accessibility:</i> CONTACT PROVIDER	 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>	 <i>After Hours Phone:</i>
<i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA	<b>TRUECARE</b>	760-736-6767
 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>	<i>Provider ID:</i> 625875	<i>License Number:</i> NM235997
<b>TRUECARE</b>	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	<i>NPI:</i> 1598122871
<i>Provider ID:</i> 625875	 <i>Phone:</i> 760-736-6767	<i>Accepting New Patients:</i> Yes
 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973	 <i>After Hours Phone:</i>	<i>Min/Max Age:</i> 0\None
 <i>Phone:</i> 760-736-6767	760-736-6767	 <i>Site English Spoken:</i> Yes
 <i>After Hours Phone:</i>	<i>License Number:</i> NM235844	 <i>Site Languages(s) Spoken:</i>
760-736-6767	<i>NPI:</i> 1598122871	Spanish
<i>License Number:</i> G71182	<i>Accepting New Patients:</i> Yes	<i>Cultural Competency:</i> No
<i>NPI:</i> 1598122871	<i>Min/Max Age:</i> 0\None	 <i>Hours:</i> SU 8:00AM-5:00PM
<i>Accepting New Patients:</i> Yes	 <i>Site English Spoken:</i> Yes	MO 8:00AM-5:00PM
<i>Min/Max Age:</i> 0\None	 <i>Site Languages(s) Spoken:</i>	TU 8:00AM-5:00PM
 <i>Site English Spoken:</i> Yes	Spanish	WE 8:00AM-5:00PM
 <i>Site Languages(s) Spoken:</i>	<i>Cultural Competency:</i> No	TH 8:00AM-5:00PM
Spanish	 <i>Hours:</i> SU 8:00AM-5:00PM	FR 8:00AM-5:00PM
<i>Cultural Competency:</i> No	MO 8:00AM-5:00PM	SA 8:00AM-5:00PM
 <i>Hours:</i> SU 8:00AM-5:00PM	TU 8:00AM-5:00PM	<i>American Sign Language (ASL):</i>
MO 8:00AM-5:00PM	WE 8:00AM-5:00PM	N
TU 8:00AM-5:00PM	TH 8:00AM-5:00PM	 <i>Accessibility:</i> CONTACT
WE 8:00AM-5:00PM	FR 8:00AM-5:00PM	PROVIDER
TH 8:00AM-5:00PM	SA 8:00AM-5:00PM	<i>Medical Group/IPA:</i> IHP OF
<i>American Sign Language (ASL):</i>	<b>TRUECARE</b>	SOUTHERN CALIFORNIA
N	<i>Provider ID:</i> 625875	 <i>Website:</i> <a href="http://www.ihpsocal.org">www.ihpsocal.org</a>
 <i>Accessibility:</i> CONTACT PROVIDER	 1595 GRAND AVE STE 100	SAN MARCOS, CA
<i>Medical Group/IPA:</i> IHP OF SOUTHERN CALIFORNIA	92069-2973	 <i>Phone:</i> 760-736-6767

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

-  *After Hours Phone:* 760-736-6767  
*License Number:* NP18874  
*NPI:* 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None
-  *Site English Spoken:* Yes  
 *Site Languages(s) Spoken:* Spanish  
*Cultural Competency:* No
-  *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM
- American Sign Language (ASL):* N  
 *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
 *Website:* [www.ihpsocal.org](http://www.ihpsocal.org)
- TRUECARE**  
*Provider ID:* 625875  
 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
 *Phone:* 760-736-6767  
 *After Hours Phone:* 760-736-6767  
*License Number:* NP20893  
*NPI:* 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None  
 *Site English Spoken:* Yes
-  *Site Languages(s) Spoken:* Spanish  
*Cultural Competency:* No
-  *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM
- American Sign Language (ASL):* N  
 *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
 *Website:* [www.ihpsocal.org](http://www.ihpsocal.org)
- TRUECARE**  
*Provider ID:* 625875  
 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
 *Phone:* 760-736-6767  
 *After Hours Phone:* 760-736-6767  
*License Number:* NP21368  
*NPI:* 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None  
 *Site English Spoken:* Yes  
 *Site Languages(s) Spoken:* Spanish  
*Cultural Competency:* No
-  *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM
- American Sign Language (ASL):* N  
 *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA
- FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):* N  
 *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA  
 *Website:* [www.ihpsocal.org](http://www.ihpsocal.org)
- TRUECARE**  
*Provider ID:* 625875  
 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973  
 *Phone:* 760-736-6767  
 *After Hours Phone:* 760-736-6767  
*License Number:* NP95001653  
*NPI:* 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None  
 *Site English Spoken:* Yes  
 *Site Languages(s) Spoken:* Spanish  
*Cultural Competency:* No
-  *Hours:* SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM
- American Sign Language (ASL):* N  
 *Accessibility:* CONTACT PROVIDER  
*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: 20A17306

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 625875

 1595 GRAND AVE STE 100  
SAN MARCOS, CA  
92069-2973

 Phone: 760-736-6767

 After Hours Phone:  
760-736-6767

License Number: A116562

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### TRUECARE

Provider ID: 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org	 Website: www.ihpsocal.org After Hours Phone: 760-736-6767 License Number: A71311 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: A60958 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: A63903 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes  Site Languages(s) Spoken: Spanish Cultural Competency: No  Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org
<b>TRUECARE</b> Provider ID: 625875  1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767  After Hours Phone: 760-736-6767 License Number: A93248 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None  Site English Spoken: Yes	 1595 GRAND AVE STE 100 SAN MARCOS, CA 92069-2973  Phone: 760-736-6767




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所



 *Site Languages(s) Spoken:* Spanish  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*


*American Sign Language (ASL):*  
 N  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*

### TRUECARE

*Provider ID: 625875*  
 1595 GRAND AVE STE 100  
 SAN MARCOS, CA  
 92069-2973  
 *Phone: 760-736-6767*  
 *After Hours Phone:*  
 760-736-6767  
*License Number: C54157*  
*NPI: 1598122871*




*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
 *Site Languages(s) Spoken:*  
 Spanish



*Cultural Competency: No*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*


*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 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*


*American Sign Language (ASL):*  
 N  
 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.ihpsocal.org*

### SAN YSIDRO

#### SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

*Provider ID: 227411*

 4050 BEYER BLVD  
 SAN YSIDRO, CA  
 92173-2007

 *Phone: 619-662-4100*

 *After Hours Phone:*  
 619-662-4100

*License Number: G52183*

*NPI: 1598122871*

*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*

*American Sign Language (ASL):*  
 N

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*








 *Website: www.ihpsocal.org*

#### SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

*Provider ID: 227411*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
Fax: 619-205-1948  
 After Hours Phone:  
619-662-4100  
License Number: A49307  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**






Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A94813

NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**






Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: C149818  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM

TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411






 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: C158543  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所






 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**



*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 *Phone: 619-662-4100*  
 *After Hours Phone: 619-662-4100*  
*License Number: C160626*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 *Phone: 619-662-4100*  
*Fax: 619-205-1948*  
 *After Hours Phone: 619-662-4100*  
*License Number: G51462*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*


*American Sign Language (ASL):*  
*N*


 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.ihpsocal.org*

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

*Provider ID: 227411*  
 4050 BEYER BLVD  
SAN YSIDRO, CA


92173-2007

 *Phone: 619-662-4100*  
*Fax: 619-205-6305*


 *After Hours Phone: 619-662-4100*  
*NPI: 1598122871*

*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
*Cultural Competency: No*




 *Hours: SU 8:30AM-5:00PM*  
*MO 8:30AM-5:00PM*  
*TU 8:30AM-5:00PM*  
*WE 8:30AM-5:00PM*  
*TH 8:30AM-5:00PM*  
*FR 8:30AM-5:00PM*  
*SA 8:30AM-5:00PM*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: www.ihpsocal.org*

### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL): Website: [www.ihpsocal.org](http://www.ihpsocal.org)

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

Phone: 619-662-4100

Fax: 619-205-1948

After Hours Phone:

619-662-4100

License Number: A72721

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

Phone: 619-662-4100

Fax: 619-205-1948

After Hours Phone:

619-662-4100

License Number: A82187

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

Phone: 619-662-4100

Fax: 619-205-1948

After Hours Phone:

619-662-4100

License Number: G20087

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


Website: [www.ihpsocal.org](http://www.ihpsocal.org)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100


 After Hours Phone:  
619-662-4100

License Number: 20A12555


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A14222


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A14949


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM


SA 8:30AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A8516


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM






WE 8:30AM-5:00PM


TH 8:30AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所



FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)



**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A111118  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF





SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A112627  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411

 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A113914  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


**SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**  
Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A138938  
NPI: 1598122871

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: A157505


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: A169577


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411

 4050 BEYER BLVD

SAN YSIDRO, CA

92173-2007

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: A175006


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:30AM-5:00PM

MO 8:30AM-5:00PM

TU 8:30AM-5:00PM

WE 8:30AM-5:00PM

TH 8:30AM-5:00PM

FR 8:30AM-5:00PM

SA 8:30AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

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## B. 联邦合资质的健康诊所


### **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 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A167529


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A32571


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO**

#### **PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A40473


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A51843


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: C42207


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:

619-662-4100

License Number: DPM2930


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM


FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: G66745


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所


**SOUTHERN CALIFORNIA**


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


**SAN YSIDRO HLTH SAN DIEGO**

**PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95001960

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


**SAN YSIDRO HLTH SAN DIEGO**

**PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95003671


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HLTH SAN DIEGO**

**PACE SENIOR HLTH SVS**

Provider ID: 227469

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: NP95003721


NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO 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 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: NP95017732

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: NP95019995

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS**

Provider ID: 227469

3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322

Phone: 619-662-4100

After Hours Phone:  
619-662-4100

License Number: PA58672

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

**PROVIDER**  
 Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469  
 3364 BEYER BLVD  
 SAN YSIDRO, CA 92173-1322  
 Phone: 619-662-4100  
 After Hours Phone:  
 619-662-4100  
 License Number: PT302385  
 NPI: 1598122871

Accepting New Patients: Yes  
 Min/Max Age: 0\None

 Site English Spoken: Yes  
 Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM


American Sign Language (ASL):  
 N


 Accessibility: CONTACT  
 PROVIDER

Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS

Provider ID: 227469  
 3364 BEYER BLVD

SAN YSIDRO, CA 92173-1322  
 Phone: 619-662-4100  
 Fax: 619-600-4870


 After Hours Phone:  
 619-662-4100

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
 Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
 MO 8:00AM-5:00PM  
 TU 8:00AM-5:00PM  
 WE 8:00AM-5:00PM  
 TH 8:00AM-5:00PM  
 FR 8:00AM-5:00PM  
 SA 8:00AM-5:00PM


American Sign Language (ASL):  
 N



 Accessibility: CONTACT  
 PROVIDER

Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411  
 4050 BEYER BLVD  
 SAN YSIDRO, CA  
 92173-2007

 Phone: 619-662-4100  
 After Hours Phone:  
 619-662-4100


License Number: A178949

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None


 Site English Spoken: Yes  
 Cultural Competency: No

 Hours: SU 8:30AM-5:00PM  
 MO 8:30AM-5:00PM  
 TU 8:30AM-5:00PM  
 WE 8:30AM-5:00PM  
 TH 8:30AM-5:00PM  
 FR 8:30AM-5:00PM  
 SA 8:30AM-5:00PM


American Sign Language (ASL):  
 N



 Accessibility: CONTACT  
 PROVIDER

Medical Group/IPA: IHP OF  
 SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR

Provider ID: 227411  
 4050 BEYER BLVD  
 SAN YSIDRO, CA  
 92173-2007

 Phone: 619-662-4100  
 After Hours Phone:  
 619-662-4100


License Number: A47906

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
 Cultural Competency: No





 Hours: SU 8:30AM-5:00PM  
 MO 8:30AM-5:00PM  
 TU 8:30AM-5:00PM  
 WE 8:30AM-5:00PM  
 TH 8:30AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)





### **SAN YSIDRO HEALTH MATERNAL AND CHILD HEALTH CTR**

Provider ID: 227411  
 4050 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: A74960  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF





SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH 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 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM


American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone: 619-662-4100  
License Number: 20A7502  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken: Spanish, Tagalog, Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM


American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**




Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所






92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 20A10964  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 20A11153  
NPI: 1598122871







Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 20A12653  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 20A17643  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所

<p>FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL):  N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A99433 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-428-4463  After Hours Phone: 619-428-4463 License Number: 20A8245 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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 <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA</p>




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所






92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: C42207  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: C51110  
NPI: 1598122871







Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: DC33693  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: G51462  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM

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至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p>FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL):  N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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</p>
<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p>
<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: NP12112  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HLTH SAN DIEGO  
PACE SENIOR HLTH SVS**  
Provider ID: 227469  
 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322  
 Phone: 619-600-4867  
 After Hours Phone:  
619-600-4867  
License Number: PA22855  
NPI: 1598122871  
Accepting New Patients: Yes




Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HLTH SAN DIEGO  
PACE SENIOR HLTH SVS**  
Provider ID: 227469  
 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322  
 Phone: 619-600-4870  
 After Hours Phone:  
619-600-4870  
License Number: NP95018617  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HLTH SAN DIEGO  
PACE SENIOR HLTH SVS**  
Provider ID: 227469  
 3364 BEYER BLVD  
SAN YSIDRO, CA 92173-1322  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A113624  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<b>SAN YSIDRO HLTH SAN DIEGO</b> <b>PACE SENIOR HLTH SVS</b> Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A120584 NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org	<b>SAN YSIDRO HLTH SAN DIEGO</b> NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org	TH 8:00AM-5:00PM FR 8:00AM-5:00PM SA 8:00AM-5:00PM American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA Website: www.ihpsocal.org
<b>SAN YSIDRO HLTH SAN DIEGO</b> <b>PACE SENIOR HLTH SVS</b> Provider ID: 227469 3364 BEYER BLVD SAN YSIDRO, CA 92173-1322 Phone: 619-662-4100 After Hours Phone: 619-662-4100 License Number: A145480	<b>SAN YSIDRO HLTH SAN DIEGO</b> NPI: 1598122871 Accepting New Patients: Yes Min/Max Age: 0\None Site English Spoken: Yes Cultural Competency: No Hours: SU 8:00AM-5:00PM MO 8:00AM-5:00PM TU 8:00AM-5:00PM WE 8:00AM-5:00PM	<b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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 Language(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所


 **Accessibility: CONTACT PROVIDER**


**Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA**

 **Website: [www.ihpsocal.org](http://www.ihpsocal.org)**


### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

**Provider ID: 206292**

 **4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007**

 **Phone: 619-662-4100**

**Fax: 619-205-6341**

 **After Hours Phone:  
619-662-4100**

**License Number: A164201**

**NPI: 1598122871**

**Accepting New Patients: Yes**

**Min/Max Age: 0\None**


**Site English Spoken: Yes**

**Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese**

**Cultural Competency: No**

 **Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM**

**American Sign Language (ASL):  
N**


 **Accessibility: CONTACT PROVIDER**


**Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA**

 **Website: [www.ihpsocal.org](http://www.ihpsocal.org)**


### **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 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM**

**American Sign Language (ASL):  
N**


 **Accessibility: CONTACT PROVIDER**


**Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA**


 **Website: [www.ihpsocal.org](http://www.ihpsocal.org)**

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

**Provider ID: 206292**

 **4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007**

 **Phone: 619-662-4100**

 **After Hours Phone:  
619-662-4100**

**License Number: PA20490**

**NPI: 1598122871**


**Accepting New Patients: Yes**

**Min/Max Age: 0\None**

**Site English Spoken: Yes**

**Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese**

**Cultural Competency: No**

 **Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM**

**American Sign Language (ASL):  
N**


 **Accessibility: CONTACT PROVIDER**

**Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA**

 **Website: [www.ihpsocal.org](http://www.ihpsocal.org)**


### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

**Provider ID: 206292**

 **4004 BEYER BLVD  
SAN YSIDRO, CA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所






92173-2007  
 Phone: 619-662-4100  
Fax: 619-205-6305  
 After Hours Phone:  
619-662-4100  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
Fax: 619-205-6341  
 After Hours Phone:  
619-662-4100  
License Number: DPM2930







NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
Fax: 619-205-6341  
 After Hours Phone:  
619-662-4100  
License Number: 20A7241  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese


Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: NP95003355  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: PA17162

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM


WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM


American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

### 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 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 20A8081

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)



### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所







92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 20A9907  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A101017  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A104660  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A106103  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## B. 联邦合资质的健康诊所

<p>FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL):  N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A114893</p>
<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p>
<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org <b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA</p>






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所







92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A125329  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A127188  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A130348  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A131021  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A131952

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM


TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)


N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A132982

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A138568

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)



### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA






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## B. 联邦合资质的健康诊所







92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A145008  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A145480  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A157505  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese


Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A158364  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)


N  
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A159673

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM


American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)


N  
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A169694

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM


WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)


N  
 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A56153

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)


N  
 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)





### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292




 4004 BEYER BLVD  
SAN YSIDRO, CA

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## B. 联邦合资质的健康诊所






92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A63844  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)




### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A66885  
NPI: 1598122871







Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A71304  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: 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 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

<p>FR 8:00AM-5:30PM SA 8:00AM-5:30PM American Sign Language (ASL):  N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p>Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA 92173-2007  Phone: 619-662-4100  After Hours Phone: 619-662-4100 License Number: A77936</p>
<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> 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</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p>
<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p>	<p>Accepting New Patients: Yes Min/Max Age: 0\None <input type="checkbox"/> Site English Spoken: Yes <input type="checkbox"/> Site Languages(s) Spoken: Spanish, Tagalog, Portuguese Cultural Competency: No  Hours: SU 8:00AM-5:30PM MO 8:00AM-5:30PM TU 8:00AM-5:30PM WE 8:00AM-5:30PM TH 8:00AM-5:30PM FR 8:00AM-5:30PM SA 8:00AM-5:30PM</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>
<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER</p>	<p>American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  Website: www.ihpsocal.org</p>	<p><b>SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER</b> Provider ID: 206292  4004 BEYER BLVD SAN YSIDRO, CA</p>






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## B. 联邦合资质的健康诊所







92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A80832  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A170738  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A173435  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese


Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

**SAN YSIDRO HEALTH SAN  
YSIDRO HEALTH CENTER**  
Provider ID: 206292  
 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
 Phone: 619-662-4100  
 After Hours Phone:  
619-662-4100  
License Number: A175006  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A177337

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM


TU 8:00AM-5:30PM

WE 8:00AM-5:30PM


TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):  Website: [www.ihpsocal.org](http://www.ihpsocal.org)


N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: A180886

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No

 Hours: SU 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007

 Phone: 619-662-4100

 After Hours Phone:  
619-662-4100

License Number: 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 8:00AM-5:30PM

MO 8:00AM-5:30PM

TU 8:00AM-5:30PM

WE 8:00AM-5:30PM

TH 8:00AM-5:30PM

FR 8:00AM-5:30PM

SA 8:00AM-5:30PM

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

### SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER

Provider ID: 206292

 4004 BEYER BLVD  
SAN YSIDRO, CA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

92173-2007  
☎ Phone: 619-662-4100  
🕒 After Hours Phone:  
619-662-4100  
License Number: A49307  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
☐ Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
🌐 Website: www.ihpsocal.org

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
📍 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
☎ Phone: 619-662-4100  
🕒 After Hours Phone:  
619-662-4100  
License Number: A40061  
NPI: 1598122871

Accepting New Patients: Yes  
Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
☐ Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
🌐 Website: www.ihpsocal.org

### **SAN YSIDRO HEALTH SAN YSIDRO HEALTH CENTER**

Provider ID: 206292  
📍 4004 BEYER BLVD  
SAN YSIDRO, CA  
92173-2007  
☎ Phone: 619-662-4100  
🕒 After Hours Phone:  
619-662-4100  
License Number: A40480  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
☐ Site Languages(s) Spoken:  
Spanish, Tagalog,  
Portuguese

Cultural Competency: No  
🕒 Hours: SU 8:00AM-5:30PM  
MO 8:00AM-5:30PM  
TU 8:00AM-5:30PM  
WE 8:00AM-5:30PM  
TH 8:00AM-5:30PM  
FR 8:00AM-5:30PM  
SA 8:00AM-5:30PM  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
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  
Fax: 619-462-5584  
🕒 After Hours Phone:  
619-515-2555  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
☐ Site English Spoken: Yes  
Cultural Competency: No  
🕒 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

SA 9:00AM-5:00PM  
American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A76059


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN


DIEGO

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: G78814


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)  
N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD

SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555


License Number: NP10943

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM


American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

Phone: 619-515-2555

After Hours Phone:  
619-515-2555

License Number: PA54588

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

Phone: 619-515-2555

After Hours Phone:  
619-515-2555

License Number: A55932

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

Phone: 619-515-2555

After Hours Phone:  
619-515-2555

License Number: A68463

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

Phone: 619-515-2555

After Hours Phone:  
619-515-2555

License Number: A148014

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

Phone: 619-515-2555

After Hours Phone:  
619-515-2555

License Number: A149063

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

Phone: 619-515-2555

After Hours Phone:  
619-515-2555

License Number: A154298

NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO

Website: [www.fhcsd.org](http://www.fhcsd.org)

### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**

Provider ID: 206361

8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

Phone: 619-515-2555

After Hours Phone:  
619-515-2555

License Number: A163464

NPI: 1134155377

Accepting New Patients: Yes


Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No


Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A164859


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)


N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A169342


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM


American Sign Language (ASL): 


N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO

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 9:00AM-5:00PM

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL): 

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: 20A11535


NPI: 1134155377

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM N

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

WE 9:00AM-5:00PM


TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)

N


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: 20A14919


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM N

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM


FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)


 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO


 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: 20A15459


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM N

MO 9:00AM-5:00PM


TU 9:00AM-5:00PM

WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL):  Website: [www.fhcsd.org](http://www.fhcsd.org)

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: FAMILY


HEALTH CENTERS OF SAN DIEGO

 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035

 Phone: 619-515-2555

 After Hours Phone:  
619-515-2555

License Number: A108228


NPI: 1134155377

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

Cultural Competency: No

 Hours: SU 9:00AM-5:00PM N

MO 9:00AM-5:00PM

TU 9:00AM-5:00PM


WE 9:00AM-5:00PM

TH 9:00AM-5:00PM

FR 9:00AM-5:00PM

SA 9:00AM-5:00PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO






 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所

 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: A113001  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC

Provider ID: 206361  
 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: A114181  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)




### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC



Provider ID: 206361  
 8788 JAMACHA RD  
SPRING VALLE, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: A116680  
NPI: 1134155377  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM

WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: FAMILY  
HEALTH CENTERS OF SAN  
DIEGO  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

### SPRING VALLEY

#### GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC



Provider ID: 206361  
 8788 JAMACHA RD  
SPRING VALLEY, CA  
91977-4035  
 Phone: 619-515-2555  
 After Hours Phone:  
619-515-2555  
License Number: A118095  
NPI: 1134155377

Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
Cultural Competency: No  
 Hours: SU 9:00AM-5:00PM  
MO 9:00AM-5:00PM  
TU 9:00AM-5:00PM  
WE 9:00AM-5:00PM  
TH 9:00AM-5:00PM  
FR 9:00AM-5:00PM  
SA 9:00AM-5:00PM  
American Sign Language (ASL):  
N






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。





## B. 联邦合资质的健康诊所






 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*



### **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 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*



### **GROSSMONT SPRING VALLEY FAMILY HLTH CTRS INC**




*Provider ID: 206361*  
 8788 JAMACHA RD  
SPRING VALLEY, CA  
91977-4035  
 *Phone: 619-515-2555*  
 *After Hours Phone: 619-515-2555*  
*License Number: C174771*  
*NPI: 1134155377*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: No*  
 *Hours: SU 9:00AM-5:00PM*  
*MO 9:00AM-5:00PM*  
*TU 9:00AM-5:00PM*  
*WE 9:00AM-5:00PM*  
*TH 9:00AM-5:00PM*  
*FR 9:00AM-5:00PM*  
*SA 9:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*



 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: FAMILY HEALTH CENTERS OF SAN DIEGO*  
 *Website: www.fhcsd.org*

### **VISTA**






### **VISTA COMMUNITY CLINIC GRAPEVINE**

*Provider ID: 400339*  
 136 GRAPEVINE RD  
VISTA, CA 92083-4004  
 *Phone: 760-631-5000*

*Fax: 760-414-3892*  
 *After Hours Phone: 760-631-5000*  
*License Number: 80000328*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
*Cultural Competency: Yes*  
 *Hours: SU 8:00AM-5:00PM*  
*MO 8:00AM-5:00PM*  
*TU 8:00AM-5:00PM*  
*WE 8:00AM-5:00PM*  
*TH 8:00AM-5:00PM*  
*FR 8:00AM-5:00PM*  
*SA 8:00AM-5:00PM*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: N/A*


### **VISTA COMMUNITY CLINIC**

*Provider ID: 206338*  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 *Phone: 760-631-5000*  
 *After Hours Phone: 760-631-5000*  
*License Number: NP95016368*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*  
 *Site English Spoken: Yes*  
 *Site Language(s) Spoken: Spanish*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

*Cultural Competency: No*

 *Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: www.vistacommunityclinic.org*

### **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 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.vistacommunityclinic.org*

### **VISTA COMMUNITY CLINIC**

*Provider ID: 206338*

 *1000 VALE TERRACE DR  
VISTA, CA 92084-5218*

 *Phone: 844-308-5003*

 *After Hours Phone:  
844-308-5003*


*License Number: NP11448*

*NPI: 1598122871*


*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:  
Spanish*

*Cultural Competency: No*

 *Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*


 *Website: www.vistacommunityclinic.org*


*nityclinic.org*

### **VISTA COMMUNITY CLINIC**

*Provider ID: 206338*

 *1000 VALE TERRACE DR  
VISTA, CA 92084-5218*

 *Phone: 844-308-5003*

 *After Hours Phone:  
844-308-5003*


*License Number: PA20775*

*NPI: 1598122871*

*Accepting New Patients: Yes*

*Min/Max Age: 0\None*

 *Site English Spoken: Yes*

 *Site Languages(s) Spoken:  
Spanish*

*Cultural Competency: No*


 *Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*

 *Website: www.vistacommunityclinic.org*

### **VISTA COMMUNITY CLINIC**

*Provider ID: 206338*

 *1000 VALE TERRACE DR  
VISTA, CA 92084-5218*

 *Phone: 760-631-5000*

 *After Hours Phone:*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

760-631-5000  
License Number: NP10896  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000  
License Number: NP95003571  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:

Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000  
License Number: NP95009149  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM

SA 8:00AM-8:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000  
License Number: NP95009284  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
🕒 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: G86902

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: 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 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: 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 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: C52564

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish



Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM





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## B. 联邦合资质的健康诊所

FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000  
License Number: DC32054  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
 Site English Spoken: Yes  
 Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000

License Number: DPM3999  
NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):



N


 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: G51286

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):




N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 Phone: 760-631-5000  
 After Hours Phone:  
760-631-5000

License Number: G79676

NPI: 1598122871

Accepting New Patients: Yes



Min/Max Age: 0\None

Site English Spoken: Yes




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## B. 联邦合资质的健康诊所



 *Site Languages(s) Spoken:* Spanish  
*FR 8:00AM-8:00PM*  
*SA 8:00AM-8:00PM*  
*Cultural Competency: No*  
 *Hours: SU 8:00AM-8:00PM*  
*MO 8:00AM-8:00PM*  
*TU 8:00AM-8:00PM*  
*WE 8:00AM-8:00PM*  
*TH 8:00AM-8:00PM*  
*FR 8:00AM-8:00PM*  
*SA 8:00AM-8:00PM*  
*American Sign Language (ASL):* N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.vistacommunityclinic.org*

### VISTA COMMUNITY CLINIC




*Provider ID: 206338*  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 *Phone: 760-631-5000*  
 *After Hours Phone: 760-631-5000*  
*License Number: 20A8949*  
*NPI: 1598122871*  
*Accepting New Patients: Yes*  
*Min/Max Age: 0\None*

 *Site English Spoken: Yes*  
 *Site Languages(s) Spoken: Spanish*



*Cultural Competency: No*  
 *Hours: SU 8:00AM-8:00PM*  
*MO 8:00AM-8:00PM*  
*TU 8:00AM-8:00PM*  
*WE 8:00AM-8:00PM*  
*TH 8:00AM-8:00PM*  
*FR 8:00AM-8:00PM*  
*SA 8:00AM-8:00PM*  
*American Sign Language (ASL):* N  
 *Accessibility: CONTACT PROVIDER*  
*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 8:00AM-8:00PM*  
*MO 8:00AM-8:00PM*  
*TU 8:00AM-8:00PM*  
*WE 8:00AM-8:00PM*  
*TH 8:00AM-8:00PM*  
*FR 8:00AM-8:00PM*  
*SA 8:00AM-8:00PM*

*American Sign Language (ASL):* N

 *Accessibility: CONTACT PROVIDER*  
*Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA*  
 *Website: www.vistacommunityclinic.org*

### VISTA COMMUNITY CLINIC

*Provider ID: 206338*  
 1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
 *Phone: 760-631-5000*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

☎ *After Hours Phone:*  
760-631-5000  
*License Number:* A56214  
*NPI:* 1598122871  
*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☐ *Site English Spoken:* Yes  
☐ *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

🌐 *Website:* [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

*Provider ID:* 206338

📍 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

☎ *Phone:* 760-631-5000

☎ *After Hours Phone:*  
760-631-5000

*License Number:* A62780

*NPI:* 1598122871

*Accepting New Patients:* Yes  
*Min/Max Age:* 0\None

☐ *Site English Spoken:* Yes

☐ *Site Languages(s) Spoken:*  
Spanish

*Cultural Competency:* No  
🕒 *Hours:* SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

🌐 *Website:* [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

*Provider ID:* 206338

📍 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

☎ *Phone:* 760-631-5000

☎ *After Hours Phone:*  
760-631-5000

*License Number:* 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 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM

*FR 8:00AM-8:00PM*

*SA 8:00AM-8:00PM*

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

🌐 *Website:* [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

*Provider ID:* 206338

📍 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

☎ *Phone:* 760-631-5000

☎ *After Hours Phone:*  
760-631-5000

*License Number:* 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 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

*American Sign Language (ASL):*  
N

♿ *Accessibility:* CONTACT PROVIDER

*Medical Group/IPA:* IHP OF SOUTHERN CALIFORNIA

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## B. 联邦合资质的健康诊所

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: RN410247

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

 Website: N/A


### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000

Fax: 760-414-3892

 After Hours Phone:  
760-631-5000

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 135 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: A60517

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM

MO 8:00AM-5:00PM

TU 8:00AM-5:00PM

WE 8:00AM-5:00PM

TH 8:00AM-5:00PM

FR 8:00AM-5:00PM

SA 8:00AM-5:00PM

American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER


Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA


 Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

 134 GRAPEVINE RD  
VISTA, CA 92083-4004

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: PA20775

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes  
Cultural Competency: No

 Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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## B. 联邦合资质的健康诊所

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD  
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:  
760-631-5000

License Number: DC32054

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### VISTA COMMUNITY CLINIC GRAPEVINE

Provider ID: 400339

134 GRAPEVINE RD  
VISTA, CA 92083-4004

Phone: 760-631-5000

After Hours Phone:  
760-631-5000

License Number: NP7791

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:00AM-5:00PM  
MO 8:00AM-5:00PM  
TU 8:00AM-5:00PM  
WE 8:00AM-5:00PM  
TH 8:00AM-5:00PM  
FR 8:00AM-5:00PM  
SA 8:00AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A  
VISTA, CA 92083-6206

Phone: 844-308-5003

Fax: 760-414-3892

After Hours Phone:  
844-308-5003

License Number: 80000328

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes

Cultural Competency: No

Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA

Website: N/A

### VCC DURIAN

Provider ID: 411518

105 DURIAN ST STE A  
VISTA, CA 92083-6206

Phone: 844-308-5003

Fax: 760-414-3892

After Hours Phone:  
844-308-5003

License Number: 1851300123

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

Site English Spoken: Yes  
Cultural Competency: No

Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

**PROVIDER**  
Medical Group/IPA: 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  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Cultural Competency: No  
Hours: SU 8:30AM-5:00PM  
MO 8:30AM-5:00PM  
TU 8:30AM-5:00PM  
WE 8:30AM-5:00PM  
TH 8:30AM-5:00PM  
FR 8:30AM-5:00PM  
SA 8:30AM-5:00PM

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: N/A

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
Phone: 760-414-3892

After Hours Phone:  
760-414-3892  
License Number: DC31392  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):

N  
Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: www.vistacommunityclinic.org

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
Phone: 760-414-3892  
After Hours Phone:  
760-414-3892  
License Number: NP23217  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes

Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA  
Website: www.vistacommunityclinic.org

### VISTA COMMUNITY CLINIC

Provider ID: 206338  
1000 VALE TERRACE DR  
VISTA, CA 92084-5218  
Phone: 760-414-3892  
After Hours Phone:  
760-414-3892  
License Number: NP95003087  
NPI: 1598122871  
Accepting New Patients: Yes  
Min/Max Age: 0\None  
Site English Spoken: Yes  
Site Languages(s) Spoken:  
Spanish  
Cultural Competency: No  
Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medical。此医疗服务提供者目录中的信息可能会发生变化。

## B. 联邦合资质的健康诊所

FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-414-3892

Fax: 760-414-3892

 After Hours Phone:  
760-414-3892


License Number: 20A9149

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Medical Group/IPA: IHP OF


SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: 20A13745

NPI: 1598122871


Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000


License Number: 20A18374

NPI: 1598122871

Accepting New Patients: Yes

Min/Max Age: 0\None

 Site English Spoken: Yes

 Site Languages(s) Spoken:  
Spanish

Cultural Competency: No

 Hours: SU 8:00AM-8:00PM  
MO 8:00AM-8:00PM  
TU 8:00AM-8:00PM  
WE 8:00AM-8:00PM  
TH 8:00AM-8:00PM  
FR 8:00AM-8:00PM  
SA 8:00AM-8:00PM

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


Medical Group/IPA: IHP OF SOUTHERN CALIFORNIA

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

### VISTA COMMUNITY CLINIC

Provider ID: 206338

 1000 VALE TERRACE DR  
VISTA, CA 92084-5218

 Phone: 760-631-5000

 After Hours Phone:  
760-631-5000

License Number: 20A7241

NPI: 1598122871

Accepting New Patients: Yes


Min/Max Age: 0\None

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## B. 联邦合资质的健康诊所

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 *Site English Spoken: Yes*

 *Site Language(s) Spoken:  
Spanish*

*Cultural Competency: No*

 *Hours: SU 8:00AM-8:00PM*

*MO 8:00AM-8:00PM*

*TU 8:00AM-8:00PM*

*WE 8:00AM-8:00PM*


*TH 8:00AM-8:00PM*

*FR 8:00AM-8:00PM*

*SA 8:00AM-8:00PM*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

*Medical Group/IPA: IHP OF  
SOUTHERN CALIFORNIA*

 *Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

<b>ALPINE</b>	
<b><u>CERTIFIED NURSE PRACTITIONER</u></b>	
<b>KAHL, NICHOLAS</b>	
Provider ID: 517802	
Provider Gender: Male	
License Number: NP95006360	
NPI: 1821306598	
<input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	
 1620 ALPINE BLVD STE 110 ALPINE, CA 91901	
 Phone: (619) 662-4100  After Hours Phone: (619) 662-4100	
 Website: www.mtnhealth.org	
Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	
<b><u>CERTIFIED NURSE PRACTITIONER</u></b>	
<b>SANDERS, JESSICA</b>	
Provider ID: 517802	
Provider Gender: Female	
License Number: NP23004	
NPI: 1760765333	
<input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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	
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	
<b><u>CHIROPRACTOR</u></b>	
<b>KELCHNER, MATTHEW</b>	
Provider ID: 517802	
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	
<b><u>CHIROPRACTOR</u></b>	
<b>ABDULRAHIM, AHMED</b>	
Provider ID: 517802	
Provider Gender: Male	
License Number: DC28335	
NPI: 1619040292	
<input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Burmese, 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	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Provider Gender: Male*  
*License Number: 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**

**VANHOLLEBEKE, RACHEL**  
*Provider ID: 517802*

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## C. 初级保健目录

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: 595793

Provider Gender: Male

NPI: 1659638062

Provider English Spoken: Y

Provider Language(s)  
Spoken: Danish, French,  
Norwegian, Swedish

Cultural Competency: N

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### **STENSMAN, LARS**

Provider ID: 517802

Provider Gender: Male

License Number: A158569


NPI: 1659638062


Provider English Spoken: Y


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Provider Language(s)  
Spoken: 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*

### **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*

### **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*

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

CAMPO, CA 91906  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**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](http://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](http://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




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM



### **FQHC**

#### **SAN YSIDRO HEALTH MOUNTAIN HEALTH FAMILY MEDICINE,**

Provider ID: 519686  
 NPI: 1174164719  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 1388 BUCKMAN SPRINGS RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 Fax: (619) 478-9164  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM



### **INTERNAL MEDICINE**


#### **IBANEZ, SIR CEDRIC**

Provider ID: 519686  
 Provider Gender: Male  
 License Number: A112484  
 NPI: 1841496452  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: NATIVIDAD MEDICAL CENTER

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1388 BUCKMAN SPRINGS RD  
 CAMPO, CA 91906


 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100





 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **SHARPE, NORMA**


Provider ID: 519686  
 Provider Gender: Female  
 License Number: PA20490  
 NPI: 1619100237  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1388 BUCKMAN SPRINGS


RD  
 CAMPO, CA 91906  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER



### **CARLSBAD**



#### **CERTIFIED NURSE PRACTITIONER**

#### **YOUNG, JENNIFER**

Provider ID: 480120  
 Provider Gender: Female  
 License Number: NP95003087  
 NPI: 1558701094  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP


 1295 CARLSBAD VILLAGE DR STE 100  
 CARLSBAD, CA 92008

 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
 Hours: M-F 8AM-5PM  
 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

---

**INTERNAL MEDICINE**

---


**PONIACHIK, SAMUEL**

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE  
 DR STE 100

CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)  
 736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM  
 SA 8AM-2PM

---

**INTERNAL MEDICINE**

---

**PONIACHIK, SAMUEL**

Provider ID: 480120

Provider Gender: Male

License Number: G74757

NPI: 1467485078

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1295 CARLSBAD VILLAGE  
 DR STE 100

CARLSBAD, CA 92008

 Phone: (760) 736-6767

 After Hours Phone: (760)  
 736-6767


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM  
 SA 8AM-2PM

---

**OBSTETRICS / GYNECOLOGY**

---

**POUNTNEY, MARLENE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Provider ID: 480120  
Provider Gender: Female  
License Number: A93248  
NPI: 1174703680

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **OBSTETRICS / GYNECOLOGY**

#### **POUNTNEY, MARLENE**

Provider ID: 480120  
Provider Gender: Female  
License Number: A93248  
NPI: 1174703680

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
ENCINITAS, SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL

Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **PEDIATRICS**

#### **BURGAMY, ELIZABETH**

Provider ID: 326275  
Provider Gender: Female  
NPI: 1164609558

Provider English Spoken: Y  
 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)









了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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**

#### **ZACHRY, ALISON**

Provider ID: 480120

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE DR STE 100  
 CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM  
 SA 8AM-2PM

### **PEDIATRICS**

#### **ZACHRY, ALISON**

Provider ID: 480120

Provider Gender: Female

License Number: A131678

NPI: 1922402858

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, TRI CITY MEDICAL CTR

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE DR STE 100  
 CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM  
 SA 8AM-2PM

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 480120

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE DR STE 100  
 CARLSBAD, CA 92008

Phone: (760) 736-6767  
 Fax: (760) 720-7204

After Hours Phone: (760) 736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM  
 SA 8AM-2PM

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 480120

Provider Gender: Male

License Number: PA22667

NPI: 1174964001

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

Phone: (760) 736-6767

Fax: (760) 720-7204

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **PHYSICIANS ASSISTANT**

#### **RUSSO, KRISTA**

Provider ID: 480120

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1295 CARLSBAD VILLAGE  
DR STE 100  
CARLSBAD, CA 92008

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **PHYSICIANS ASSISTANT**

#### **RUSSO, KRISTA**

Provider ID: 480120

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

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

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 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- medic  
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### CERTIFIED NURSE PRACTITIONER

---


**LEONARD, BEVERLY**

Provider ID: 206355

Provider Gender: Female

License Number: NP10943

NPI: 1285772392


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: www.fhcsd.org

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


License Number: 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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### CERTIFIED NURSE PRACTITIONER

---

#### **QUILALANG, SUSAN**

Provider ID: 427322

Provider Gender: Female


License Number: RN371480


NPI: 1841200482


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### CERTIFIED NURSE PRACTITIONER

---

#### **ROSS, CRYSTAL**

Provider ID: 427322

Provider Gender: Female

License Number: NP95015413

NPI: 1548683378

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON, GROSSMONT


HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### CERTIFIED NURSE PRACTITIONER

---

#### **SICKLES, MAGGIE**

Provider ID: 427322

Provider Gender: Female


License Number: NP22000


NPI: 1821346826


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### CERTIFIED NURSE PRACTITIONER

---

#### **VEGA, TERESA**

Provider ID: 206355

Provider Gender: Female

License Number: NP95001705





NPI: 1912304569




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## C. 初级保健目录








 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **CHIROPRACTOR**

#### **PLANTE, CHARLES**

Provider ID: 427322

Provider Gender: Male

License Number: DC31963

NPI: 1760464960

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **CHIROPRACTOR**

#### **REYNOSO, ALFONSO**

Provider ID: 427322

Provider Gender: Male

License Number: DC20760

NPI: 1285921627

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

#### **CARRILLO, MARITZA**

Provider ID: 427322

Provider Gender: Female

License Number: A163183

NPI: 1649628587

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

#### **CRUZ, MICHAEL**

Provider ID: 427322

Provider Gender: Male

License Number: A138772

NPI: 1265851133

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### ENDOCRINOLOGY

### METABOLISM DIABETES

#### VINCENT, LAUREN

Provider ID: 427322

Provider Gender: Female

License Number: A134303

NPI: 1053757997

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### ALANIZ, MATEO

Provider ID: 427322

Provider Gender: Male

License Number: A124388

NPI: 1700175577

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### AMANAT, SOROOSH

Provider ID: 427322

Provider Gender: Male

License Number: A153022

NPI: 1003279621

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM

### FAMILY PRACTICE

#### ARCEGOMEZ, LAURA

Provider ID: 427322

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: 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-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **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-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **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](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **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](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes


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## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 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](http://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  
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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**

#### **HUBLEY, PAUL**


*Provider ID: 206355*

*Provider Gender: Male*

*License Number: A73172*

*NPI: 1568496974*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Board Certified Specialty: No*

*FAMILY HEALTH CENTERS OF SAN DIEGO*

 251 LANDIS AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619) 515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**


#### **JIMENEZ, KRISTAL**

*Provider ID: 427322*

*Provider Gender: Female*

*License Number: A159831*

*NPI: 1922531250*

 *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS*


*MERCY HOSPITAL CHULA*


*VISTA*


*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**

#### **LACH, REBECCA**


*Provider ID: 427322*

*Provider Gender: Female*

*License Number: A177922*

*NPI: 1679137780*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **FAMILY PRACTICE**

#### **LAW, KAREN**

*Provider ID: 427322*

*Provider Gender: Female*



*License Number: A138534*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 1205253150


 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: CHULA  
 VISTA COMM HOSP

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

#### **MCKENNETT, MARIANNE**

Provider ID: 427322

Provider Gender: Female

License Number: G57243

NPI: 1376639666

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL CHULA  
 VISTA, SCRIPPS MERCY


HOSPITAL

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

#### **MENON, POOJA**

Provider ID: 427322

Provider Gender: Female


License Number: A123263


NPI: 1053600064


 Provider English Spoken: Y  
 Cultural Competency: N

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

#### **MERRILL, SARAH**

Provider ID: 427322

Provider Gender: Female

License Number: A123492

NPI: 1225399512

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **FAMILY PRACTICE**


#### **MOYA, MARY**

Provider ID: 427322

Provider Gender: Female

License Number: A80185

NPI: 1093844417

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, SCRIPPS


MERCY HOSPITAL CHULA


VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **NGUYEN, CARIE**

Provider ID: 427322

Provider Gender: Female

License Number: A106103


NPI: 1174781132


 Provider English Spoken: Y  
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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**


#### **NGUYEN, 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](http://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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p>	<p><i>Provider ID: 206355</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A119689</i></p> <p><i>NPI: 1174810972</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><i>Board Certified Specialty: No</i></p> <p><i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org /clinics/chula- vista- medic al- plaza</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p>
<hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>PEDROTTY, JOHN</b></p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: G80234</i></p> <p><i>NPI: 1992861629</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 678 3RD AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 662-4100</i></p> <p> <i>After Hours Phone: (619) 662-4100</i></p> <p> <i>Website: www.syhealth.org /clinics/chula- vista- medic al- plaza</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>PIEROS, JANELLE</b></p> <p><i>Provider ID: 427322</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: 20A13225</i></p> <p><i>NPI: 1386935914</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Faroese, Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA</i></p>	<hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>PINA, RAQUEL</b></p> <p><i>Provider ID: 206355</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A177698</i></p> <p><i>NPI: 1255893368</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 251 LANDIS AVE CHULA VISTA, CA 91910</p> <p> <i>Phone: (619) 515-2500</i></p> <p> <i>After Hours Phone: (619) 515-2500</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p>
<hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>PEREZ, PERLITA</b></p>		

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **SHAHTAJI, ALAN**

Provider ID: 427322

Provider Gender: Male

License Number: 20A11087

NPI: 1972751089

 Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR, UCSD LA


JOLLA JOHN SALLY


THORNTON

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


#### **SWARTZ, JOHN**

Provider ID: 427322

Provider Gender: Male

License Number: G72486

NPI: 1396754131

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY


HOSPITAL, LOS ANGELES


COUNTY HARBOR UCLA


MEDICAL CENTER

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
 CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **TEE, ALEXANDRA**

Provider ID: 427322

Provider Gender: Female

License Number: A164392

NPI: 1881198406

 Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

MEMORIAL HOSPITAL, UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**


**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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


**TREJO, RAUL**

Provider ID: 427322

Provider Gender: Male

License Number: A77936

NPI: 1174534184

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**VELASQUEZ, SHARON**

Provider ID: 427322

Provider Gender: Female

License Number: A71304

NPI: 1972732584

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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## C. 初级保健目录

<p><b>FAMILY PRACTICE</b></p> <p><b>WHITLEY, NICHOLAS</b>            Provider ID: 427322            Provider Gender: Male            License Number: A118250            NPI: 1629394721</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N            Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p><input type="checkbox"/> 678 3RD AVE            CHULA VISTA, CA 91910  <input type="phone"/> Phone: (619) 662-4100  <input type="phone"/> After Hours Phone: (619) 662-4100  <input type="website"/> Website: <a href="http://www.syhealth.org/clinics/chula-vista-medical-plaza">www.syhealth.org/clinics/chula-vista-medical-plaza</a></p> <p>Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p>	<p>Cultural Competency: N            Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p><input type="checkbox"/> 678 3RD AVE            CHULA VISTA, CA 91910  <input type="phone"/> Phone: (619) 662-4100  <input type="phone"/> After Hours Phone: (619) 662-4100  <input type="website"/> Website: <a href="http://www.syhealth.org/clinics/chula-vista-medical-plaza">www.syhealth.org/clinics/chula-vista-medical-plaza</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p>	<p><input type="website"/> Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER  <input type="clock"/> Hours: M-F 8AM-5PM</p>
<p><b>FAMILY PRACTICE</b></p> <p><b>YOON, RYAN</b>            Provider ID: 427322            Provider Gender: Male            License Number: A114600            NPI: 1942435144</p> <p><input type="checkbox"/> Provider English Spoken: Y</p>	<p><b>FQHC</b></p> <p><b>CHULA VISTA FAMILY HLTH CTR,</b>            Provider ID: 206355            NPI: 1346480837</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p><input type="checkbox"/> 251 LANDIS AVE            CHULA VISTA, CA 91910  <input type="phone"/> Phone: (619) 515-2500            Fax: (619) 397-1161  <input type="phone"/> After Hours Phone: (619) 515-2500</p>	<p><b>FQHC</b></p> <p><b>FAMILY HLTH CTR SAN DIEGO-RICE FAM HC,</b>            Provider ID: 417641            NPI: 1083959464</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p><input type="checkbox"/> 352 L ST            CHULA VISTA, CA 91911  <input type="phone"/> Phone: (619) 515-2325            Fax: (619) 420-0660  <input type="phone"/> After Hours Phone: (619) 515-2325  <input type="website"/> Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a>            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER  <input type="clock"/> Hours: M-F 8AM-5PM</p>
		<p><b>FQHC</b></p> <p><b>SAN YSIDRO HEALTH CHULA VISTA,</b>            Provider ID: 427322</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

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-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4PM

### FQHC

#### **SAN YSIDRO HEALTH SOUTH BAY PEDIATRICS,**


Provider ID: 664445

NPI: 1184135873

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 280 E ST  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 426-2170


 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### GENERAL DENTISTRY

#### **PHAM, QUYNH**

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-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### 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-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### 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

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## C. 初级保健目录

MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### INTERNAL MEDICINE


**CHEN, TSUH-YIN**


Provider ID: 427322

Provider Gender: Female

License Number: C55563

NPI: 1093803520

 Provider English Spoken: Y

 Provider Language(s) Spoken: Portuguese, Spanish

Cultural Competency: N



Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE

CHULA VISTA, CA 91910

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### INTERNAL MEDICINE

**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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

N

 *Accessibility: CONTACT PROVIDER*  
 *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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

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### **INTERNAL MEDICINE**


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#### **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*

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### **INTERNAL MEDICINE**

---


#### **VELAZQUEZ CAMARENA, MARIA**

*Provider ID: 427322*

*Provider Gender: Female*

*License Number: A56153*

*NPI: 1518965714*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS*


*MERCY HOSPITAL CHULA*  
*VISTA*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 678 3RD AVE  
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

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### **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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)*

*Medi-Cal Open Panel: Yes*

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## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **ALIMONOS, LYSISTRATI**

Provider ID: 206355

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,

SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**


#### **BUECHNER, CHARLENE**

Provider ID: 206355

Provider Gender: Female

License Number: A68463

NPI: 1376663831

 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 251 LANDIS AVE  
CHULA VISTA, CA 91910

 Phone: (619) 515-2500

 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **CHAKRABARTI, PRIYA**


Provider ID: 206355

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y


 Provider Language(s)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

*Spoken: Spanish*  
*Cultural Competency: N*  
*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  
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 *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  
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 *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)*


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## C. 初级保健目录


*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*CORONADO HOSP AND*  
*HEALTHCARE CTR, SCRIPPS*  
*MERCY HOSPITAL,*  
*GROSSMONT HOSPITAL*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
N



 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F*  
*8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **LOEFFLER, ALLISON**


*Provider ID: 206355*  
*Provider Gender: Female*  
*License Number: A116680*  
*NPI: 1700073962*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation:*  
*GROSSMONT HOSPITAL,*


*SCRIPPS MERCY HOSPITAL,*  
*SCRIPPS MERCY HOSPITAL*  
*CHULA VISTA*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*

 251 LANDIS AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
515-2500

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
N



 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F*  
*8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **MENDEZ, DIEGO**


*Provider ID: 427322*  
*Provider Gender: Male*  
*License Number: A47906*  
*NPI: 1437181922*


 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: 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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT*  
*PROVIDER*

### **OBSTETRICS / GYNECOLOGY**

#### **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*

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## C. 初级保健目录


 251 LANDIS AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
 515-2500  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://www.syhealth.org)



/clinics/chula- vista- medic  
 al- plaza  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **SHORT, ABIADÉ**

Provider ID: 427322  
 Provider Gender: Male  
 License Number: A114893  
 NPI: 1750559589  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: PARADISE  
 VALLEY HOSPITAL, SHARP  
 CHULA VISTA MED CTR,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA, SCRIPPS  
 MERCY HOSPITAL  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP






 678 3RD AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 /clinics/chula- vista- medic  
 al- plaza  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

Provider ID: 206355  
 Provider Gender: Female  
 License Number: 20A13958  
 NPI: 1932269198  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: Sharp  
 Grossmont Hospital  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 251 LANDIS AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
 515-2500  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **TRUJILLO, JENNIFER**

Provider ID: 427322  
 Provider Gender: Female  
 License Number: 20A8204

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 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **OPHTHALMOLOGY**


#### **PAPASTERGIU, GEORGIOS**


Provider ID: 427322

Provider Gender: Male

License Number: A127706

NPI: 1790054393

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Farsi,  
French, Greek, Italian,  
Spanish


Cultural Competency: N


Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL


CENTER, SCRIPPS MEMORIAL  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 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

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## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### OPHTHALMOLOGY

#### SKAF, AYHAM

Provider ID: 427322

Provider Gender: Male

License Number: A120584

NPI: 1285888628

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Spanish

Cultural Competency: N

Hospital Affiliation: EL

CENTRO REGIONAL MEDICAL  
CENTER, SHARP MEMORIAL  
HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

678 3RD AVE  
CHULA VISTA, CA 91910

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/chula-vista-medical-plaza](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### AKASHI, MARC

Provider ID: 163322

Provider Gender: Male

NPI: 1205002417

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MERCY

HOSPITAL CHULA VISTA,  
SHARP CHULA VISTA MED  
CTR, SCRIPPS MERCY  
HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

769 MEDICAL CENTER CT  
STE 300  
CHULA VISTA, CA 91911

Phone: (619) 482-3090  
Fax: (619) 482-7350

After Hours Phone: (619)  
482-3090

Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

#### ATIENZA, PAMELA

Provider ID: 106987

Provider Gender: Female

NPI: 1417916107

Provider English Spoken: Y

Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

890 EASTLAKE PKWY STE  
200  
CHULA VISTA, CA 91914

Phone: (619) 656-6817  
Fax: (619) 656-6908

After Hours Phone: (619)  
506-1218

Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F

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## C. 初级保健目录

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

### 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,

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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- medic  
al- plaza

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### DORINGO, ELAINIE

Provider ID: 267100

Provider Gender: Female

NPI: 1013005636

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ALVARADO  
HOSPITAL LLC, RADY

CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT

HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,

SHARP CHULA VISTA MED  
CTR, UCSD LA JOLLA JOHN

SALLY THORNTON, SCRIPPS  
MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

NETWORK

865 3RD AVE STE 101

CHULA VISTA, CA 91911

Phone: (619) 426-7910

Fax: (619) 426-2337

After Hours Phone: (619)  
426-7910

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Phone: (619) 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

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### PEDIATRICS

#### FLORES, ERNEST

Provider ID: 658652


Provider Gender: Male

NPI: 1043848807

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 865 3RD AVE STE 101  
CHULA VISTA, CA 91911

 Phone: (619) 426-7910

Fax: (619) 426-2337

 After Hours Phone: (619) 426-7910


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

SA 8AM-0PM

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### 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


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### PEDIATRICS

#### 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

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### PEDIATRICS

#### GARCIA, RAFAEL

Provider ID: 360408

Provider Gender: Male

NPI: 1053414086



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish, 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录








 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*

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### **PEDIATRICS**

---

#### **ISAIAS, AGNELA**








*Provider ID: 664445*  
*Provider Gender: Female*  
*License Number: A82912*  
*NPI: 1790772572*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CORONADO HOSP AND HEALTHCARE CTR*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 *280 E ST CHULA VISTA, CA 91910*  
 *Phone: (619) 662-4100*  
*Fax: (619) 426-2170*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\21*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

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### **PEDIATRICS**

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#### **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*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 8AM-0PM*









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### **PEDIATRICS**

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#### **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*

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### **PEDIATRICS**

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#### **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*








了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\21  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### 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 AVE STE 101  
 CHULA VISTA, CA 91911  
 Phone: (619) 426-7910  
 Fax: (619) 426-2337  
 After Hours Phone: (619) 426-7910  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8AM-0PM


### PEDIATRICS


#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### 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, MARIACORAZON

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](http://www.syhealth.org/clinics/chula-vista-medical-plaza)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

### **PEDIATRICS**


#### **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*

*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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/chula-vista-medic-al-plaza](http://www.syhealth.org/clinics/chula-vista-medic-al-plaza)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*


### **PEDIATRICS**


#### **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*

*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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PHYSICIANS ASSISTANT**


#### **BALDONADO, ANALICIA**

*Provider ID: 417641*

*Provider Gender: Female*

*License Number: PA61683*

*NPI: 1215477765*


 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 352 L ST  
CHULA VISTA, CA 91911

 *Phone: (619) 515-2325*

 *After Hours Phone: (619)  
515-2325*


 *Website: www.fhcsd.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **PHYSICIANS ASSISTANT**


#### **INDA, PRISCILLA**


*Provider ID: 427322*

*Provider Gender: Female*

*License Number: PA54404*

*NPI: 1679008379*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic, Russian, Spanish*


*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 678 3RD AVE  
CHULA VISTA, CA 91910

 *Phone: (619) 662-4100*

 *After Hours Phone: (619)  
662-4100*


 *Website: www.syhealth.org  
/clinics/chula- vista- medic  
al- plaza*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT 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- medic  
al- 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*

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## C. 初级保健目录

<i>PROVIDER</i>	<i>Cultural Competency: N</i>	 <i>Website: www.fhcsd.org</i>
<hr/> <b>PHYSICIANS ASSISTANT</b>	<i>Hospital Affiliation: SHARP</i>	<i>Medi-Cal Open Panel: Yes</i>
<b>REVELES, DIANA</b>	<i>CORONADO HOSP AND</i>	<i>Min/Max Age: 0\None</i>
<i>Provider ID: 417641</i>	<i>HEALTHCARE CTR</i>	<i>American Sign Language (ASL):</i>
<i>Provider Gender: Female</i>	<i>Board Certified Specialty: No</i>	<i>N</i>
<i>License Number: PA19306</i>	<i>IHP OF SOUTHERN CAL-PHP</i>	 <i>Accessibility: CONTACT</i>
<i>NPI: 1548455405</i>	 <i>678 3RD AVE</i>	<i>PROVIDER</i>
 <i>Provider English Spoken: Y</i>	<i>CHULA VISTA, CA 91910</i>	<hr/> <b>REGISTERED PHYSICAL</b>
 <i>Provider Language(s)</i>	 <i>Phone: (619) 662-4100</i>	<b>THERAPIST</b>
<i>Spoken: Spanish</i>	 <i>After Hours Phone: (619)</i>	<hr/> <b>AMAYA, RICARDO</b>
<i>Cultural Competency: N</i>	<i>662-4100</i>	<i>Provider ID: 206355</i>
<i>Board Certified Specialty: No</i>	 <i>Website: www.syhealth.org</i>	<i>Provider Gender: Male</i>
<i>FAMILY HEALTH CENTERS OF</i>	<i>/clinics/chula- vista- medic</i>	<i>License Number: PT37189</i>
<i>SAN DIEGO</i>	<i>al- plaza</i>	<i>NPI: 1437445566</i>
 <i>352 L ST</i>	<i>Medi-Cal Open Panel: Yes</i>	 <i>Provider English Spoken: Y</i>
<i>CHULA VISTA, CA 91911</i>	<i>Min/Max Age: 0\None</i>	<i>Cultural Competency: N</i>
 <i>Phone: (619) 515-2325</i>	<i>American Sign Language (ASL):</i>	<i>Board Certified Specialty: No</i>
 <i>After Hours Phone: (619)</i>	<i>N</i>	<i>FAMILY HEALTH CENTERS OF</i>
<i>515-2325</i>	 <i>Accessibility: CONTACT</i>	<i>SAN DIEGO</i>
 <i>Website: www.fhcsd.org</i>	<i>PROVIDER</i>	 <i>251 LANDIS AVE</i>
<i>Medi-Cal Open Panel: Yes</i>	<hr/> <b>PODIATRIST</b>	<i>CHULA VISTA, CA 91910</i>
<i>Min/Max Age: 0\None</i>	<b>SCHNEIDER, SARAH</b>	 <i>Phone: (619) 515-2500</i>
<i>American Sign Language (ASL):</i>	<i>Provider ID: 206355</i>	 <i>After Hours Phone: (619)</i>
<i>N</i>	<i>Provider Gender: Female</i>	<i>515-2500</i>
 <i>Accessibility: CONTACT</i>	<i>License Number: DPM4819</i>	 <i>Website: www.fhcsd.org</i>
<i>PROVIDER</i>	<i>NPI: 1326282237</i>	<i>Medi-Cal Open Panel: Yes</i>
<hr/> <b>PODIATRIST</b>	 <i>Provider English Spoken: Y</i>	<i>Min/Max Age: 0\None</i>
<b>MANCHEL, BRUCE</b>	<i>Cultural Competency: N</i>	<i>American Sign Language (ASL):</i>
<i>Provider ID: 427322</i>	<i>Board Certified Specialty: No</i>	<i>N</i>
<i>Provider Gender: Male</i>	<i>FAMILY HEALTH CENTERS OF</i>	 <i>Accessibility: CONTACT</i>
<i>License Number: DPM2930</i>	<i>SAN DIEGO</i>	<i>PROVIDER</i>
<i>NPI: 1790890788</i>	 <i>251 LANDIS AVE</i>	<hr/> <b>REGISTERED PHYSICAL</b>
 <i>Provider English Spoken: Y</i>	<i>CHULA VISTA, CA 91910</i>	<b>THERAPIST</b>
 <i>Provider Language(s)</i>	 <i>Phone: (619) 515-2500</i>	<hr/> <b>CUMMINGS, GEORGE</b>
<i>Spoken: Spanish</i>	 <i>After Hours Phone: (619)</i>	<i>Provider ID: 206355</i>
	<i>515-2500</i>	

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## C. 初级保健目录

Provider Gender: Male  
 License Number: PT295173  
 NPI: 1497236384  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO



 251 LANDIS AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
 515-2500  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER


### REGISTERED PHYSICAL THERAPIST

**GEORGE, JENNIFER**  
 Provider ID: 206355  
 Provider Gender: Female  
 License Number: PT294245  
 NPI: 1215402177  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 251 LANDIS AVE  
 CHULA VISTA, CA 91910  
 Phone: (619) 515-2500  
 After Hours Phone: (619)  
 515-2500  
 Website: www.fhcsd.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F  
 8:30AM-5:30PM






### REGISTERED PHYSICAL THERAPIST

**GONZALES, MICHELLE**  
 Provider ID: 206355  
 Provider Gender: Female  
 License Number: PT291706  
 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


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 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 *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- medic al- 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- medic al- plaza*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **EL CAJON**

#### **CERTIFIED NURSE PRACTITIONER**



#### **BELEN, NEZER**


*Provider ID: 418340*  
*Provider Gender: Male*  
*License Number: NP95009292*  
*NPI: 1386120723*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**


 525 E MAIN ST  
 EL CAJON, CA 92020

 *Phone: (619) 515-2498*  
 *After Hours Phone: (619) 515-2498*

 *Website: www.fhcsd.org*  
*Medi-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*

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## C. 初级保健目录

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

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

### CERTIFIED NURSE PRACTITIONER

**HARPEL, SHERYL**

Provider ID: 569910

Provider Gender: Female

License Number: NP95009329

NPI: 1780177147

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD

EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: www.syhealth.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

**JENSEN, ADRIENNE**

Provider ID: 569910

Provider Gender: Female

License Number: NP95023148

NPI: 1184389934

Provider English Spoken: Y

Cultural Competency: N

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: www.syhealth.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **KELLOGG, KRISTEN**

Provider ID: 418340

Provider Gender: Female

License Number: NP95009180

NPI: 1649757741

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **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

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


### SAN DIEGO

 1111 W CHASE AVE  
EL CAJON, CA 92020  
 Phone: (619) 515-2499  
 After Hours Phone: (619)  
515-2499  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER

 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


 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)  
312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): **ODA, THAGHAR**

N



 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

#### **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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

#### **CERTIFIED NURSE PRACTITIONER**


Provider ID: 418340

Provider Gender: Female



License Number: NP95000205


NPI: 1063835692

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Amharic, Arabic  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

#### **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

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## C. 初级保健目录

### FAMILY HEALTH CENTERS OF SAN DIEGO




 525 E MAIN ST  
 EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619) 515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

#### **CERTIFIED NURSE PRACTITIONER**

#### **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  
 Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
 Board Certified Specialty: No  
 LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
 EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)

312-0347

 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 g  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

#### **CERTIFIED NURSE PRACTITIONER**

#### **REGEV, SHANEE**

Provider ID: 569910  
 Provider Gender: Female  
 License Number: NP95022460  
 NPI: 1477218121  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
 EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

#### **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](http://www.lamaestra.org)  
 g  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

#### **CERTIFIED 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

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## C. 初级保健目录

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619)  
515-2498

Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### 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

**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.or  
g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### CERTIFIED NURSE PRACTITIONER

**VILLANUEVADEGUTIE,  
BERENICE**

Provider ID: 185267

Provider Gender: Female

License Number: NP95002188

NPI: 1952795536

Provider English Spoken: Y



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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)  
312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER

#### **WILLIAMS, BREAHA**

Provider ID: 185267  
Provider Gender: Female  
License Number: NP95001840  
NPI: 1063884864

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC


 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619)  
312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)

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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED REGISTERED

### NURSE MIDWIFE


#### **CORRY, ANDREA**

Provider ID: 418340  
Provider Gender: Female  
License Number: NM1721  
NPI: 1255489571

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

#### **HOURIHAN, KEITH**

Provider ID: 418501  
Provider Gender: Male  
License Number: DC29314  
NPI: 1306916994






Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC


 1032 BROADWAY





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## C. 初级保健目录


EL CAJON, CA 92021  
 Phone: (619) 795-5983  
 After Hours Phone: (619) 795-5983  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F  
8:30AM-5:30PM






### 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### CHIROPRACTOR



**SOSA, DAVID**  
Provider ID: 206354  
Provider Gender: Male  
License Number: DC33150  
NPI: 1013308675  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1111 W CHASE AVE  
EL CAJON, CA 92020  
 Phone: (619) 515-2499  
 After Hours Phone: (619) 515-2499  
 Website: [www.fhcsd.org](http://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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### ENDOCRINOLOGY METABOLISM DIABETES

**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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

<p>N 🗿 Accessibility: CONTACT PROVIDER 🕒 Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM</p>	<p>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</p>	<p>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</p>
<p><b>ENDOCRINOLOGY</b> <b>METABOLISM DIABETES</b></p>		<p><b>FAMILY PRACTICE</b></p>
<p><b>NAGELBERG, JODI</b> 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</p>	<p>Provider ID: 418340 Provider Gender: Male License Number: A163977 NPI: 1942705637 🗿 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 📍 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</p>	<p><b>FAMILY PRACTICE</b> <b>BAGINGITO, AUSTIN</b> Provider ID: 418340 Provider Gender: Male License Number: A163977 NPI: 1942705637 🗿 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO 📍 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</p>
<p><b>FAMILY PRACTICE</b></p>	<p><b>FAMILY PRACTICE</b></p>	
<p><b>AL ANI, NAJWAN</b></p>	<p><b>ALGHAMDI, ASMA</b> 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</p>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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**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






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**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


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**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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **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**

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 8AM-5PM

### FAMILY PRACTICE

**NASSIR, BASSAM**

Provider ID: 569910

Provider Gender: Male

License Number: A101888

NPI: 1386848166

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### FAMILY PRACTICE

**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](http://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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### LA MAESTRA FAMILY CLINIC

181 REA AVE  
EL CAJON, CA 92020  
Phone: (619) 312-0347  
After Hours Phone: (619) 312-0347

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

#### 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

FAMILY HEALTH CENTERS OF  
SAN DIEGO

525 E MAIN ST  
EL CAJON, CA 92020

Phone: (619) 515-2498

After Hours Phone: (619) 515-2498

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M-F  
8:30AM-5:30PM

### FAMILY PRACTICE

#### SALEM, RAMSEY

Provider ID: 569910

Provider Gender: Male

License Number: A158364

NPI: 1245401298

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

### 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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M-F  
8:30AM-5:30PM

### FAMILY PRACTICE

#### SCHUMAKER, EDWARD

Provider ID: 185267

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

165 S 1ST ST  
EL CAJON, CA 92019

Phone: (619) 312-0347

After Hours Phone: (619) 312-0347

Website: [www.lamaestra.org](http://www.lamaestra.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### FQHC

#### CHASE AVENUE FAMILY HEALTH CTRS INC,


Provider ID: 206354

NPI: 1104861681

 Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

 1111 W CHASE AVE  
EL CAJON, CA 92020

 Phone: (619) 515-2499

Fax: (619) 593-7164

 After Hours Phone: (619) 515-2499


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### FQHC

#### FAMILY HLTH CTR SAN DIEGO-EL CAJON,


Provider ID: 418340

NPI: 1932561198

 Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498

Fax: (619) 269-0191

 After Hours Phone: (619) 515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

SA 8:30AM-5:30PM

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### FQHC

#### LA MAESTRA CHC EL CAJON BROADWAY,


Provider ID: 418501

NPI: 1134590086


 Provider English Spoken: Y  
Cultural Competency: N

LA MAESTRA FAMILY CLINIC

 1032 BROADWAY  
EL CAJON, CA 92021

 Phone: (619) 795-5991

Fax: (619) 795-5992

 After Hours Phone: (619) 795-5991

 Website: [www.lamaestra.org](http://www.lamaestra.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### 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](http://www.lamaestra.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### FQHC

#### LA MAESTRA FAMILY CLINIC INC,

Provider ID: 185267






NPI: 1336353721

 Provider English Spoken: Y  
Cultural Competency: N

LA MAESTRA FAMILY CLINIC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
Fax: (619) 749-5480  
 After Hours Phone: (619)  
312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU 8AM-5PM  
TH-F 8AM-5PM

### FQHC








#### **SAN YSIDRO HEALTH EL CAJON,**

Provider ID: 569910  
NPI: 1568845741  
 Provider English Spoken: Y  
Cultural Competency: N  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
Fax: (619) 785-3356  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### HEPATOLOGY

#### **GISH, ROBERT**




Provider ID: 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](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### 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

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE



#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## C. 初级保健目录


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE



#### CARPENTERIII, ROBERT







Provider ID: 569910  
Provider Gender: Male  
License Number: 20A10964  
NPI: 1356343040  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### DUONG, MAI


Provider ID: 418340  
Provider Gender: Female  
License Number: A127798  
NPI: 1629339304  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE



#### GORGES, RANDA

Provider ID: 418340  
Provider Gender: Female  
License Number: A138815  
NPI: 1285079509

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO  
 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE

#### JABRI, ZAIN

Provider ID: 418501  
Provider Gender: Male  
License Number: A160760  
NPI: 1891159620  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: ST AGNES  
MEDICAL CENTER, CITY OF  
HOPE NATIONAL MED CTR,  
JOHN F KENNEDY MEMORIAL  
HOSP, SUTTER MEDICAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

CENTER 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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE

#### MANSY, TAMARA

Provider ID: 569910

Provider Gender: Female

License Number: A164238

NPI: 1396277737

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://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](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### MICHAEL, RAMI

Provider ID: 569910

Provider Gender: Male

License Number: A144513

NPI: 1467871673

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Chaldean  
Neo-Aramaic

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

875 EL CAJON BLVD  
EL CAJON, CA 92020

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### INTERNAL MEDICINE

#### NADI, FAHIMA

Provider ID: 418340

Provider Gender: Female


License Number: A175325

NPI: 1770072290


Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 *Provider Language(s)*  
Spoken: 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**


#### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**Provider Gender:** 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

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **TCHAKMAKJIAN, LEVON**

Provider ID: 569910




Provider Gender: Male


License Number: C144411

NPI: 1790744795

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Armenian, Hebrew  
Cultural Competency: N

Hospital Affiliation: NORTH  
BAY VACAVALLEY HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### 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](http://www.syhealth.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


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## C. 初级保健目录


*Cultural Competency: N*  
*Hospital Affiliation:*  
*GROSSMONT HOSPITAL,*  
*SCRIPPS MERCY HOSPITAL*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
N



 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F*  
*8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**


*Provider ID: 418340*  
*Provider Gender: Female*  
*License Number: A68463*  
*NPI: 1376663831*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*MEMORIAL HOSPITAL,*  
*SCRIPPS MERCY HOSPITAL,*  
*SCRIPPS MERCY HOSPITAL*  
*CHULA VISTA, SHARP MARY*

*BIRCH HOSP FOR WOMEN*  
*AND NEWBORNS*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT*  
*PROVIDER*

### **OBSTETRICS / GYNECOLOGY**



#### **CARTER, KHALIL**


*Provider ID: 418340*  
*Provider Gender: Male*  
*License Number: A113001*  
*NPI: 1225231582*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
*MERCY HOSPITAL,*  
*GROSSMONT HOSPITAL, TRI*  
*CITY MEDICAL CTR*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*


 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
N



 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F*  
*8:30AM-5:30PM*  
*SA 8:30AM-5:30PM*

### **OBSTETRICS / GYNECOLOGY**


#### **CHAKRABARTI, PRIYA**

*Provider ID: 418340*  
*Provider Gender: Female*  
*License Number: A163464*  
*NPI: 1326531401*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS*  
*MERCY HOSPITAL, Sharp*  
*Grossmont Hospital*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*

 525 E MAIN ST  
EL CAJON, CA 92020  
 Phone: (619) 515-2498  
 After Hours Phone: (619)  
515-2498


 Website: [www.fhcsd.org](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

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## C. 初级保健目录

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DORUELO, ASHLEY**

Provider ID: 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

Provider ID: 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **KHAN, ALIYA**

Provider ID: 418501

Provider Gender: Female

License Number: G50634

NPI: 1285687350


Provider English Spoken: Y


Provider Language(s)  
Spoken: Hindi, Urdu


Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 1032 BROADWAY  
EL CAJON, CA 92021

 Phone: (619) 795-5991

 After Hours Phone: (619)  
795-5991


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL):  Hours: M-F  
8:30AM-5:30PM

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):  Hours: M-F

N

 Accessibility: CONTACT PROVIDER

### **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

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **OBSTETRICS / GYNECOLOGY**


#### **SAPRA, SONIA**

Provider ID: 418340

Provider Gender: Female

License Number: A164859

NPI: 1952751711

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 525 E MAIN ST  
EL CAJON, CA 92020

 Phone: (619) 515-2498

 After Hours Phone: (619)  
515-2498


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **STABEN, REBECCA**

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### CHULA VISTA

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



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

<p><b>OPHTHALMOLOGY</b></p> <p><b>PAPASTERGIU, GEORGIOS</b>            Provider ID: 569910            Provider Gender: Male            License Number: A127706            NPI: 1790054393</p> <p> 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</p> <p> 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</p>	<p>Provider Gender: Male            License Number: A87650            NPI: 1376723759</p> <p> 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</p> <p> 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</p>	<p>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</p> <p> 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</p>
<p><b>OPHTHALMOLOGY</b></p> <p><b>PONS, MAURICIO</b>            Provider ID: 569910</p>	<p><b>OPHTHALMOLOGY</b></p> <p><b>SKAF, AYHAM</b>            Provider ID: 569910            Provider Gender: Male            License Number: A120584            NPI: 1285888628</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Arabic, Spanish</p>	<p><b>PEDIATRICS</b></p> <p><b>ADJAN, ROULA</b>            Provider ID: 185267            Provider Gender: Female            License Number: A81682            NPI: 1992847263</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Arabic, French, Spanish            Cultural Competency: N            Board Certified Specialty: No LA MAESTRA FAMILY CLINIC</p> <p> 165 S 1ST ST EL CAJON, CA 92019   Phone: (619) 280-4213</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录



 After Hours Phone: (619) 280-4213  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### 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](http://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](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM

### PEDIATRICS

#### **FLEMING, TARA**

Provider ID: 418340  
 Provider Gender: Female  
 License Number: A152462

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


NPI: 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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### PEDIATRICS

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#### 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

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### PEDIATRICS

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#### 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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### PEDIATRICS

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#### 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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):

N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8:30AM-5:30PM*

### **PEDIATRICS**

#### **JONES, SETAREH**

*Provider ID: 185267*  
*Provider Gender: Female*  
*License Number: A110010*  
*NPI: 1033441316*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Board Certified Specialty: No*  
*LA MAESTRA FAMILY CLINIC*


 165 S 1ST ST  
 EL CAJON, CA 92019  
 *Phone: (619) 312-0347*  
 *After Hours Phone: (619) 312-0347*  
 *Website: www.lamaestra.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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Min/Max Age: 0\19

American Sign Language (ASL): Provider ID: 546215

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### **PEDIATRICS**

#### **NGUYEN, VI**

Provider ID: 546509

Provider Gender: Female

NPI: 1053540534


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

 844 JACKMAN ST

EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619) 442-2560

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

---


### **PEDIATRICS**


#### **PINTO, ANITA**

Provider ID: 546215

Provider Gender: Female

NPI: 1477663722

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Hindi

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND


NEWBORNS, RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

 844 JACKMAN ST

EL CAJON, CA 92020

 Phone: (619) 442-2560

Fax: (619) 442-7836

 After Hours Phone: (619) 442-2560

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### **PEDIATRICS**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



 Phone: (619) 795-5991  
 After Hours Phone: (619) 795-5991  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM

### PHYSICIANS ASSISTANT


**ALYAS, ALISIA**  
Provider ID: 185267  
Provider Gender: Female  
License Number: PA58466  
NPI: 1437768017  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
 165 S 1ST ST  
EL CAJON, CA 92019  
 Phone: (619) 312-0347  
 After Hours Phone: (619) 312-0347  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER






### PHYSICIANS ASSISTANT

**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](http://www.lamaestra.org)







Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### PHYSICIANS ASSISTANT

**CONDEZ, EDSSEL**  
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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM SA 8:30AM-5:30PM

### 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](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## C. 初级保健目录

<b>N</b>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5:30PM SA 8:30AM-2PM</i>	<i>License Number: PA18719</i> <i>NPI: 1447468137</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>  1111 W CHASE AVE EL CAJON, CA 92020  <i>Phone: (619) 515-2499</i>  <i>After Hours Phone: (619) 515-2499</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i>	EL CAJON, CA 92020  <i>Phone: (619) 662-4100</i>  <i>After Hours Phone: (619) 662-4100</i>  <i>Website: www.syhealth.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>
<hr/> <b>PHYSICIANS ASSISTANT</b> <b>MERCER, KELLY</b> <i>Provider ID: 418501</i> <i>Provider Gender: Female</i> <i>License Number: PA21625</i> <i>NPI: 1154609790</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Arabic</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <b>LA MAESTRA FAMILY CLINIC</b>  1032 BROADWAY EL CAJON, CA 92021  <i>Phone: (619) 795-5991</i>  <i>After Hours Phone: (619) 795-5991</i>  <i>Website: www.lamaestra.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i>	<hr/> <b>PHYSICIANS ASSISTANT</b> <b>TURNER, ERIC</b> <i>Provider ID: 206354</i> <i>Provider Gender: Male</i> <i>License Number: PA55067</i> <i>NPI: 1669756128</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>  1111 W CHASE AVE EL CAJON, CA 92020  <i>Phone: (619) 515-2499</i>  <i>After Hours Phone: (619) 515-2499</i>  <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i>	
<hr/> <b>PHYSICIANS ASSISTANT</b> <b>PATEL, SHREYA</b> <i>Provider ID: 206354</i> <i>Provider Gender: Female</i>	<hr/> <b>PHYSICIANS ASSISTANT</b> <b>ROSENBLATT, SHERILYN</b> <i>Provider ID: 569910</i> <i>Provider Gender: Female</i> <i>License Number: PA22872</i> <i>NPI: 1114041621</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</i> <i>Board Certified Specialty: No</i> <b>IHP OF SOUTHERN CAL-PHP</b>  875 EL CAJON BLVD	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

<hr/> <b>PHYSICIANS ASSISTANT</b> <hr/> <b>TURNER, SHEREENA</b> Provider ID: 418340 Provider Gender: Female License Number: PA20396 NPI: 1992934988 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF 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	<i>Spoken: Spanish</i> 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	 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
<hr/> <b>PODIATRIST</b> <hr/> <b>JUAREZ, LETICIA</b> Provider ID: 418340 Provider Gender: Female License Number: DPM5661 NPI: 1508393778 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s)	<hr/> <b>PODIATRIST</b> <hr/> <b>LE, DIANA</b> Provider ID: 418340 Provider Gender: Female License Number: DPM5734 NPI: 1184112864 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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	<hr/> <b>REGISTERED PHYSICAL THERAPIST</b> <hr/> <b>CUMMINGS, GEORGE</b> Provider ID: 418340 Provider Gender: Male License Number: PT295173 NPI: 1497236384 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### **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*

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### **REGISTERED PHYSICAL THERAPIST**

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#### **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*

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### **REGISTERED PHYSICAL THERAPIST**

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#### **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*

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### **REGISTERED PHYSICAL THERAPIST**

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#### **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*

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## **ENCINITAS**

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### **PEDIATRICS**

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#### **BRION, SONJA**

*Provider ID: 386639*


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## C. 初级保健目录

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### HOSPITAL 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

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU 8AM-5PM  
W 9AM-5PM

TH-F 8AM-5PM

### CERTIFIED NURSE

### PRACTITIONER

#### KAHL, NICHOLAS

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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Provider 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**  
Provider ID: 206270  
Provider Gender: Male  
License Number: DC12036  
NPI: 1851320337  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760) 520-8100  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **CHIROPRACTOR**

**ZECHA, RONALD**  
Provider ID: 206270  
Provider Gender: Male

License Number: DC28605  
NPI: 1427252121  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760) 520-8100  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-0PM


### **FAMILY PRACTICE**

**ARRIETA, NOEMI**  
Provider ID: 588941  
Provider Gender: Female  
License Number: 20A11153  
NPI: 1912223496  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录







 704 E GRAND AVE  
ESCONDIDO, CA 92025  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**


#### **AVILA, MICHAEL**






Provider ID: 206270  
Provider Gender: Male  
License Number: A159727  
NPI: 1962936450  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
 After Hours Phone: (760)  
520-8100  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-0PM

### **FAMILY PRACTICE**


#### **CASTANER, ZALYA**

Provider ID: 206270  
Provider Gender: Female  
License Number: A139490  
NPI: 1487072179  
 Provider English Spoken: Y  
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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Hours: M-W 8AM-8PM  
TH-F 8AM-5PM

---

### FAMILY PRACTICE

---

#### COX, VICTORIA

Provider ID: 588941

Provider Gender: Female


License Number: C171064


NPI: 1093087819

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### FAMILY PRACTICE

---


#### FERRAILOLO, NATALIE

Provider ID: 206270

Provider Gender: Female

License Number: A152372

NPI: 1306290143

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


 After Hours Phone: (760)  
520-8100

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

---

### 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](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

---

### FAMILY PRACTICE

---

#### LAI, AMARA

Provider ID: 206271









Provider Gender: Female

License Number: A120348

NPI: 1790912855

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*  
*Cultural Competency: N*  
*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-0PM*




### **FAMILY PRACTICE**

#### **NAKAMURA, MELANIE**

*Provider ID: 206270*  
*Provider Gender: Female*  
*License Number: A107557*  
*NPI: 1104022672*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 *Phone: (760) 520-8100*  
 *After Hours Phone: (760)  
520-8100*  
 *Website: www.ihpsocal.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-5PM  
SA 8AM-0PM*

### **FAMILY PRACTICE**

#### **PATEL, JITENBHAI**

*Provider ID: 206270*  
*Provider Gender: Male*  
*License Number: A94128*  
*NPI: 1902921406*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 460 N ELM ST  
ESCONDIDO, CA 92025  
 *Phone: (760) 520-8100*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

📞 After Hours Phone: (760) 520-8100

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **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**

#### **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

📞 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](http://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](http://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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>SANDHU, BASANT</b> 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	<i>Spoken: Farsi, Greek, Spanish</i> 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 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	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
<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>SCHULTZ, JAMES</b> 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	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>SCHULTZ, JAMES</b> 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	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>TANTOD, KULIN</b> Provider ID: 206270 Provider Gender: Male License Number: A109655 NPI: 1902058928 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 460 N ELM ST ESCONDIDO, CA 92025 Phone: (760) 520-8100 After Hours Phone: (760) 520-8100 Website: www.ihpsocal.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1417640491

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

---

### FAMILY PRACTICE


#### THOMPSON, CHERYL

Provider ID: 206270

Provider Gender: Female

License Number: A102687

NPI: 1548429863

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100


 Website: [www.ihpsocal.org](http://www.ihpsocal.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

---


### FQHC

#### 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](http://www.ihpsocal.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

---

### 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

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## C. 初级保健目录

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](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FQHC

#### NEIGHBORHOOD

#### HEALTHCARE VALLEY PARKWAY,

Provider ID: 206271

NPI: 1720264641

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

728 E VALLEY PKWY  
ESCONDIDO, CA 92025

Phone: (760) 737-6900

Fax: (360) 462-2748

After Hours Phone: (760)  
737-6900

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU 8AM-5PM  
W 9AM-5PM

TH-F 8AM-5PM

### FQHC

#### SAN YSIDRO HEALTH

#### ESCONDIDO FAMILY

#### MEDICINE,

Provider ID: 588941

NPI: 1801438239

Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE  
ESCONDIDO, CA 92025

Phone: (619) 662-4100

Fax: (760) 745-7847

After Hours Phone: (619)  
662-4100

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### AGUERO, AMETHYST

Provider ID: 652372

Provider Gender: Female

License Number: 20A19473

NPI: 1568021913

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

128 N BROADWAY  
ESCONDIDO, CA 92025

Phone: (760) 546-2858

After Hours Phone: (760)  
546-2858

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### CARRERA, JORGE

Provider ID: 588941

Provider Gender: Male

License Number: G58033

NPI: 1184728586

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

704 E GRAND AVE  
ESCONDIDO, CA 92025

Phone: (619) 662-4100

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

☎ *After Hours Phone: (619) 662-4100*

🌐 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

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### **INTERNAL MEDICINE**

---

#### **CHEN, MARGARET**

*Provider ID: 235296*

*Provider Gender: Female*

*NPI: 1659305084*

☐ *Provider English Spoken: Y*

☐ *Provider Language(s) Spoken: Greek, Spanish*

*Cultural Competency: N*

*Board Certified Specialty: No*

*COMMUNITY CARE IPA LLC*

📍 *460 N ELM ST  
ESCONDIDO, CA 92025*

☎ *Phone: (760) 520-8100*

*Fax: (360) 462-2745*

☎ *After Hours Phone: (760) 520-8100*

🌐 *Website: N/A*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM  
SA 8AM-0PM*

---

### **INTERNAL MEDICINE**

---

#### **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-0PM*

---

### **INTERNAL MEDICINE**

---

#### **VETTICADEN, SANTOSH**

*Provider ID: 206270*

*Provider Gender: Male*

*License Number: C53062*

*NPI: 1679102461*

☐ *Provider English Spoken: Y*

*Cultural Competency: N*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

📍 *460 N ELM ST*

*ESCONDIDO, CA 92025*

☎ *Phone: (760) 520-8100*

☎ *After Hours Phone: (760) 520-8100*

🌐 *Website: www.ihpsocal.org*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM  
SA 8AM-0PM*

---

### **PEDIATRICS**

---

#### **AGUILAR, EDITA**

*Provider ID: 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*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<b>PEDIATRICS</b>		<b>PEDIATRICS</b>	
<b>AGUILAR, EDITA</b>		<b>COHEN, CARA</b>	
Provider ID: 206266		Provider ID: 661879	
Provider Gender: Female		Provider Gender: Female	
License Number: A56054		NPI: 1215021274	
NPI: 1467407411		<input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	
<input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish, Tagalog Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP		<input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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	
<input type="checkbox"/> 425 N DATE ST ESCONDIDO, CA 92025 <input type="phone"/> Phone: (760) 520-8340 <input type="phone"/> After Hours Phone: (760) 520-8340 <input type="website"/> Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\21 American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER		<input type="checkbox"/> 426 N DATE ST ESCONDIDO, CA 92025 <input type="phone"/> Phone: (760) 520-8340 <input type="phone"/> After Hours Phone: (760) 520-8340 <input type="website"/> Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\21 American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER <input type="clock"/> Hours: M-F 8AM-5PM	
<b>PEDIATRICS</b>		<b>PEDIATRICS</b>	
<b>ALDANA, NANCY</b>		<b>CHOW, BYRON</b>	
Provider ID: 424775		Provider ID: 206270	
Provider Gender: Female		Provider Gender: Male	
License Number: A62467		License Number: A78116	
NPI: 1558371963		NPI: 1619907607	
<input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Hospital Affiliation: TRI CITY		<input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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	
<input type="checkbox"/> 425 N DATE ST ESCONDIDO, CA 92025 <input type="phone"/> Phone: (760) 520-8340 <input type="phone"/> After Hours Phone: (760) 520-8340 <input type="website"/> Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\21 American Sign Language (ASL): N <input type="wheelchair"/> Accessibility: CONTACT PROVIDER		<input type="checkbox"/> 460 N ELM ST ESCONDIDO, CA 92025 <input type="phone"/> Phone: (760) 746-2641 <input type="phone"/> After Hours Phone: (760) 746-2641	


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\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-0PM

### **PEDIATRICS**


#### **CURET, ZULMA**

Provider ID: 206270

Provider Gender: Female

License Number: A119661

NPI: 1841561107

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 460 N ELM ST  
 ESCONDIDO, CA 92025

 Phone: (760) 520-8100

 After Hours Phone: (760) 520-8100

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

#### **DOSHI, NEELIMA**


Provider ID: 424775

Provider Gender: Female

License Number: A67626

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Hindi, Spanish


Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 426 N DATE ST  
 ESCONDIDO, CA 92025

 Phone: (760) 690-5900

 After Hours Phone: (760) 690-5900

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\21

American Sign Language (ASL):  
 N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**


#### **DOSHI, NEELIMA**

Provider ID: 640252

Provider Gender: Female

NPI: 1417921578

 Provider English Spoken: Y

 Provider Language(s)  
 Spoken: Hindi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO

Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC

 426 N DATE ST

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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

**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







**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录




### NETWORK

 240 W MISSION AVE STE A  
ESCONDIDO, CA 92025  
 Phone: (760) 747-5400  
Fax: (760) 747-2286  
 After Hours Phone: (760)  
747-5400  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

### PHYSICIANS ASSISTANT

#### BAISLEY, SHAWN


Provider ID: 588941  
Provider Gender: Male  
License Number: PA52347  
NPI: 1376936120  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 704 E GRAND AVE  
ESCONDIDO, CA 92025  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT



### PROVIDER

### PHYSICIANS ASSISTANT

#### SHARPE, NORMA



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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM

---

### **CERTIFIED NURSE PRACTITIONER**

---


#### **EVERETT, ELIZABETH**

Provider ID: 624122

Provider Gender: Female

License Number: NP95025094

NPI: 1942952767


 Provider English Spoken: Y


 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](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM

---

### **CERTIFIED NURSE PRACTITIONER**

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#### **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](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **KELLEHER, BRIDGET**

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
FALLBROOK, CA 92028

 Phone: (760) 723-6200

 After Hours Phone: (760)  
723-6200

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **KELLEHER, BRIDGET**

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N




Hospital Affiliation: TRI CITY  
MEDICAL CTR


Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760)  
723-6200

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---

**KELLEHER, BRIDGET**

Provider ID: 624122

Provider Gender: Female

License Number: NP95003447

NPI: 1245695006




Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 321 E ALVARADO ST  
FALLBROOK, CA 92028  
 Phone: (760) 723-6200  
 After Hours Phone: (760)  
723-6200

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---

**RACKHAM, KELLY**

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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM

---

### **CERTIFIED NURSE PRACTITIONER**

---

**RACKHAM, KELLY**

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717




NPI: 1801497284


Provider English Spoken: Y

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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM

---

### **CERTIFIED NURSE PRACTITIONER**

---

**RACKHAM, KELLY**

Provider ID: 624122

Provider Gender: Male

License Number: NP95015717

NPI: 1801497284

Provider English Spoken: Y

Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
📍 321 E ALVARADO ST  
FALLBROOK, CA 92028  
☎️ *Phone: (760) 723-6200*  
📞 *After Hours Phone: (760) 723-6200*  
🌐 *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
♿️ *Accessibility: CONTACT PROVIDER*  
🕒 *Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM*

### **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-0:30PM  
W-TH 8AM-5PM*

### **FQHC**

**VISTA COMMUNITY CLINIC,**  
*Provider ID: 624122*  
*NPI: 1316501562*  
📄 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*IHP OF SOUTHERN CAL-PHP*  
📍 321 E ALVARADO ST  
FALLBROOK, CA 92028  
☎️ *Phone: (760) 723-6200*  
📞 *After Hours Phone: (760) 723-6200*  
🌐 *Website: www.vistacommunityclinic.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
♿️ *Accessibility: CONTACT PROVIDER*  
🕒 *Hours: M 8AM-4PM  
TU 8AM-0:30PM  
W-TH 8AM-5PM*

### **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-0:30PM  
W-TH 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

Min/Max Age: 0\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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM

### 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](http://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](http://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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

662-4100  
Website: 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-0PM

#### PEDIATRICS

#### GANDHI, SHEETAL

Provider ID: 282029  
Provider Gender: Female  
NPI: 1700858859  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

4150 REGENTS PARK ROW  
STE 355  
LA JOLLA, CA 92037  
Phone: (858) 457-2043  
Fax: (858) 457-2092  
After Hours Phone: (858)  
457-2043  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM




#### PEDIATRICS

#### HUNTER, WENDY

Provider ID: 377597  
Provider Gender: Female  
NPI: 1053515551  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
7300 GIRARD AVE STE 106  
LA JOLLA, CA 92037  
Phone: (858) 459-4351  
Fax: (858) 459-4399  
After Hours Phone: (858)  
459-4351



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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\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): **TUNG, VIVIAN**

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**

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: 613881  
Provider Gender: Female  
NPI: 1477223576  
 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Cultural Competency: N  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

8881 FLETCHER PKWY STE  
200

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)  
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM

### CERTIFIED NURSE PRACTITIONER

#### **WARD, KATHERINE**

Provider ID: 613887

Provider Gender: Female

NPI: 1477223576

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

8881 FLETCHER PKWY STE  
205

LA MESA, CA 91942

Phone: (619) 464-6434

Fax: (619) 464-5109

After Hours Phone: (619)  
464-6434

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM

### 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 1  
LA MESA, CA 91942

Phone: (619) 698-0606

Fax: (619) 332-5149

After Hours Phone: (619)  
698-0606

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5:30PM

### 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

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## C. 初级保健目录

*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*

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## C. 初级保健目录

 Hours: M-F 8AM-6PM  
SA 11:30AM-3:30PM

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### **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

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### **PEDIATRICS**


---

#### **GIANFORTUNE, RACHEL**

Provider ID: 450501

Provider Gender: Female

NPI: 1912193301

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO, SHARP MEMORIAL  
HOSPITAL, GROSSMONT  
HOSPITAL

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8881 FLETCHER PKWY STE  
205

LA MESA, CA 91942

 Phone: (619) 464-6434

 After Hours Phone: (619)  
464-6434

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

---

### **PEDIATRICS**


---

#### **IMUS, PAUL**

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


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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录


*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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录







 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

##### FERRAILOLO, 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

### **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](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **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](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **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

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## C. 初级保健目录

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

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### **CERTIFIED NURSE PRACTITIONER**

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#### **SMITH, SHARON**

Provider ID: 419139

Provider Gender: Female

License Number: NP15444

NPI: 1780603597

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

7592 BROADWAY

LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)  
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE 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

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### **FAMILY PRACTICE**

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#### **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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

### SAN DIEGO

7592 BROADWAY  
LEMON GROVE, CA 91945

Phone: (619) 515-2550

After Hours Phone: (619)  
515-2550

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

#### **FAMILY PRACTICE**

### **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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Hours: M-F 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

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**

#### **FOLCHTORRES-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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS  
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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
Hours: M-F 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

MARINHEALTH MEDICAL  
CENTER, SCRIPPS MERCY  
HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

7592 BROADWAY  
LEMON GROVE, CA 91945

Phone: (619) 515-2550  
After Hours Phone: (619)  
515-2550

Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **SLEIMAN, JOSEPH**

Provider ID: 419139

Provider Gender: Male

License Number: A102060

NPI: 1093976748

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, French,  
Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

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: 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.operationsa  
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-6PM  
F 8AM-5PM

### **CERTIFIED NURSE**

### **PRACTITIONER**

#### **AQUINO, FELINO**

Provider ID: 418302

Provider Gender: Male

License Number: NP22974

NPI: 1356684781

Provider English Spoken: Y

Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Spoken: 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](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **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 HOSPITAL  
 Board Certified Specialty: No  
**LA MAESTRA FAMILY CLINIC**  
 217 HIGHLAND AVE

NATIONAL CITY, CA 91950  
 Phone: (619) 434-7308  
 Fax: (619) 434-7310  
 After Hours Phone: (619) 434-7308  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

**LIM, IMELDA**  
 Provider ID: 418302  
 Provider Gender: Female  
 License Number: NP95000203  
 NPI: 1093130395  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Tagalog  
 Cultural Competency: N  
 Board Certified Specialty: No  
**OPERATION SAMAHAN**  
 2101 GRANGER AVE  
 NATIONAL CITY, CA 91950  
 Phone: (844) 200-2426  
 After Hours Phone: (844) 200-2426  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **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](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-6PM  
 F 8AM-5PM

### **CERTIFIED NURSE PRACTITIONER**

**LUM, YUIN-WAH**  
 Provider ID: 418930  
 Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


License Number: 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


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.or  
g

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.or  
g


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM

### 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.or  
g


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM

### CERTIFIED NURSE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<b>PRACTITIONER</b>	
<b>REID, EMILY</b> Provider ID: 185270 Provider Gender: Female License Number: NP95002766 NPI: 1083081467 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No <b>LA MAESTRA FAMILY CLINIC</b> 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	Board Certified Specialty: No <b>LA MAESTRA FAMILY CLINIC</b> 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
<b>CERTIFIED NURSE PRACTITIONER</b>	
<b>VERDUZCO GONZALEZ, AURORA</b> Provider ID: 185270 Provider Gender: Female License Number: NP95001961 NPI: 1932452323 Provider English Spoken: Y Provider Language(s) Spoken: Spanish Cultural Competency: N	<b>VILLANUEVADEGUTIE, BERENICE</b> Provider ID: 185270 Provider Gender: Female License Number: NP95002188 NPI: 1952795536 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No <b>LA MAESTRA FAMILY CLINIC</b> 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
<b>CERTIFIED NURSE PRACTITIONER</b>	
<b>WILLIAMS, BREAUNA</b> 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 <b>LA MAESTRA FAMILY CLINIC</b> 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	<b>CHIROPRACTOR</b> <b>HOURIHAN, KEITH</b> Provider ID: 185270

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

*Provider Gender: Male*  
*License Number: 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*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 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/clinic/s/paradise-hills-family-clinic](http://syhealth.org/clinic/s/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


Hospital Affiliation: PARADISE  
 VALLEY HOSPITAL

Board Certified Specialty: No  
 OPERATION SAMAHAN

 2743 HIGHLAND AVE  
 NATIONAL CITY, CA 91950

 Phone: (844) 200-2426

 After Hours Phone: (844)  
 200-2426

 Website: [www.operationsamahan.org](http://www.operationsamahan.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-TH 8AM-6PM  
 F 8AM-5PM

### **FAMILY PRACTICE**

#### **CARRIEDO-CENICEROS,**


#### **MARIA**

Provider ID: 227412

Provider Gender: Female

License Number: A78373

NPI: 1295746618


 Provider English Spoken: Y


 Provider Language(s)  
 Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1136 D AVE  
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)  
 662-4100

 Website: [syhealth.org/clinic/s/national-city-family-clinic-1](http://syhealth.org/clinic/s/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**

#### **CEVALLOS, JAMES**

Provider ID: 227412

Provider Gender: Male

License Number: A55469

NPI: 1720181829

 Provider English Spoken: Y


 Provider Language(s)  
 Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA


Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1136 D AVE  
 NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 474-3722

 After Hours Phone: (619)  
 662-4100


 Website: [syhealth.org/clinic/s/national-city-family-clinic-1](http://syhealth.org/clinic/s/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **FAMILY 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](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-3:30PM  
TU 10:30AM-5:30PM  
W 8:30AM-3:30PM  
TH 10:30AM-5:30PM  
F 8:30AM-3:30PM

### **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](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **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)







了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

662-4100  
 Website: [syhealth.org/clinic/s/paradise-hills-family-clinic](http://syhealth.org/clinic/s/paradise-hills-family-clinic)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

**MEDINA, ALEXANDER**  
 Provider ID: 361428  
 Provider Gender: Male  
 License Number: A133539  
 NPI: 1467714436  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL  
 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  
 330 E 8TH ST  
 NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER






**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/clinic/s/paradise-hills-family-clinic](http://syhealth.org/clinic/s/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, VANESSAMARIA**  
 Provider ID: 227418  
 Provider Gender: Female  
 License Number: A113624  
 NPI: 1952563421  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL

### **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

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/clinic/s/paradise-hills-family-clinic](http://syhealth.org/clinic/s/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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

330 E 8TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

**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](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

**OCEGUEDA, JOSHUA**

Provider ID: 227412

Provider Gender: Male

License Number: A165184

NPI: 1336643345

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1136 D AVE  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/national-city-family-clinic-1](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

**RICHARDSON, DANIELLE**

Provider ID: 227418

Provider Gender: Female

License Number: A127555

NPI: 1609142892

Provider English Spoken: Y

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](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

**ROBERTS, POMAI**

Provider ID: 227412

Provider Gender: Female

License Number: A103218

NPI: 1023278314

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1136 D AVE  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/national-city-family-clinic-1](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FAMILY PRACTICE

#### SCHUMAKER, EDWARD

Provider ID: 185270

Provider Gender: Male

License Number: 20A6433

NPI: 1184616872

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)  
434-7308

Website: [www.lamaestra.org](http://www.lamaestra.org)

g

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### SNOOK, BRIAN

Provider ID: 227418

Provider Gender: Male

License Number: 20A11518

NPI: 1295977353

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2806

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### STONES, RACHEL

Provider ID: 185270

Provider Gender: Female

License Number: A167184

NPI: 1720583040

Provider English Spoken: Y  
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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: TH 8AM-2PM

### FAMILY PRACTICE

#### VELASQUEZ, SHARON

Provider ID: 227418

Provider Gender: Female

License Number: A71304

NPI: 1972732584

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)  
662-4100

Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

### FQHC

**FAMILY HEALTH CTR SD  
NATIONAL CITY,**

Provider ID: 418930

NPI: 1417409228

Provider English Spoken: Y  
Cultural Competency: N

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1000 EUCLID AVE  
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

Fax: (619) 269-0053

After Hours Phone: (619)  
515-2399

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-3:30PM  
TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

### FQHC

**LA MAESTRA FAMILY CLINIC  
INC,**

Provider ID: 185270

NPI: 1336353721

Provider English Spoken: Y  
Cultural Competency: N

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

Fax: (619) 434-7310

After Hours Phone: (619)  
434-7308

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

Hours: TH 8AM-2PM

### FQHC

**OPERATION SAMAHAN -  
NATIONAL C,**

Provider ID: 417102

NPI: 1801907449

Provider English Spoken: Y  
Cultural Competency: N

OPERATION SAMAHAN

2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 474-3919

After Hours Phone: (844)  
200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-6PM  
F 8AM-5PM

### FQHC

**OPERATION SAMAHAN  
GRANGER SCHOOL BASED,**

Provider ID: 418302

NPI: 1205134517

Provider English Spoken: Y  
Cultural Competency: N

OPERATION SAMAHAN

2101 GRANGER AVE  
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 434-8999

After Hours Phone: (844)  
200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **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](http://syhealth.org/clinics/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


### **FQHC**

#### **SAN YSIDRO HEALTH**

**PARADISE HILLS,**

Provider ID: 227418


NPI: 1598907487

 Provider English Spoken: Y

Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 259-2807

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FQHC**

#### **SAN YSIDRO HEALTH SOUTH BAY,**


Provider ID: 361428

NPI: 1851757215

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 330 E 8TH ST  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

Fax: (619) 434-3514

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **HEPATOLOGY**

#### **GISH, ROBERT**


Provider ID: 185270

Provider Gender: Male

License Number: G45632

NPI: 1548281322


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Dutch, French,  
Spanish, Vietnamese


Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

 Phone: (619) 434-7308

 After Hours Phone: (619)  
434-7308


 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM

### **INTERNAL MEDICINE**

#### **BRAVERMAN, IRA**

Provider ID: 10635


Provider Gender: Male


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 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 N


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](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 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/clinic/s/national-city-family-clinic-1](http://syhealth.org/clinic/s/national-city-family-clinic-1)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **ROUEL, WADI**

Provider ID: 185270

Provider Gender: Male

License Number: C55979

NPI: 1740254713

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Provider English Spoken: Y*  
 *Provider Language(s) Spoken: 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, 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







了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Phone: (619) 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, 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**







#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1437444858

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RADY CHILDRENS

HOSPITAL SAN DIEGO

Board Certified Specialty: No

LA MAESTRA FAMILY CLINIC

217 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (619) 434-7308

After Hours Phone: (619)  
434-7308

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **DAY, CHRISTOPHER**

Provider ID: 418930

Provider Gender: Male

License Number: A163862

NPI: 1184121253

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1000 EUCLID AVE  
NATIONAL CITY, CA 91950

Phone: (619) 515-2399

After Hours Phone: (619)  
515-2399

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-3:30PM

TU 10:30AM-5:30PM

W 8:30AM-3:30PM

TH 10:30AM-5:30PM

F 8:30AM-3:30PM

### **PEDIATRICS**

#### **FRESNO, BLANCA**

Provider ID: 102433

Provider Gender: Female

NPI: 1346258787

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: PARADISE  
VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

655 EUCLID AVE STE 207  
NATIONAL CITY, CA 91950

Phone: (619) 475-4575

Fax: (619) 475-4578

After Hours Phone: (619)  
475-4575

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

Hours: SU-SA 8AM-5PM

### **PEDIATRICS**

#### **GARCIA, RAFAEL**

Provider ID: 84954

Provider Gender: Male

NPI: 1053414086

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

610 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 527-7700

Fax: (619) 527-3226

After Hours Phone: (619)  
527-7700

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

American Sign Language (ASL): **UY, CARMELITA**

N


 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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

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

### PEDIATRICS

**RANA, DEBORAH**

Provider ID: 227418

Provider Gender: Female

License Number: G88347

NPI: 1033191457

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL


HOSPITAL ENCINITAS, CHULA


VISTA COMM HOSP


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 2400 E 8TH ST STE A  
NATIONAL CITY, CA 91950

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [syhealth.org/clinics/paradise-hills-family-clinic](http://syhealth.org/clinics/paradise-hills-family-clinic)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


### PEDIATRICS

**VALENCIA, MARILES**

Provider ID: 104060

Provider Gender: Female

NPI: 1275541625

 Provider English Spoken: Y

 Provider Language(s)

### PHYSICIANS ASSISTANT

**ARMENTA, JORGE**

Provider ID: 185270

Provider Gender: Male

License Number: PA13694

NPI: 1346382611

 Provider English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Board Certified Specialty: No*  
**LA MAESTRA FAMILY CLINIC**  
217 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (619) 434-7308  
After Hours Phone: (619) 434-7308  
Website: [www.lamaestra.org](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5:30PM

### 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### MARTINEZ-MURGUIA, IRENE

Provider ID: 185270  
Provider Gender: Female  
License Number: PA20296  
NPI: 1447492889  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
**LA MAESTRA FAMILY CLINIC**

217 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (619) 434-7308  
After Hours Phone: (619) 434-7308  
Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER

### PHYSICIANS ASSISTANT

#### MERCER, KELLY

Provider ID: 185270  
Provider Gender: Female  
License Number: PA21625  
NPI: 1154609790  
Provider English Spoken: Y

Provider Language(s) Spoken: Arabic  
Cultural Competency: N  
Board Certified Specialty: No  
**LA MAESTRA FAMILY CLINIC**  
217 HIGHLAND AVE  
NATIONAL CITY, CA 91950  
Phone: (619) 434-7308  
After Hours Phone: (619) 434-7308  
Website: [www.lamaestra.org](http://www.lamaestra.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5:30PM

## OCEANSIDE

### CERTIFIED NURSE

### PRACTITIONER

#### BAEK, KILHYO

Provider ID: 206341  
Provider Gender: Female  
License Number: NP95003571  
NPI: 1053776914  
Provider English Spoken: Y  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

📞 After Hours Phone: (760) 631-5000  
 🌐 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER

#### **BAEK, KILHYO**

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

☐ Provider English Spoken: Y

☐ 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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT

PROVIDER  
 🕒 Hours: M-F 8AM-5PM SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER

#### **BAEK, KILHYO**

Provider ID: 206341

Provider Gender: Female

License Number: NP95003571

NPI: 1053776914

☐ Provider English Spoken: Y

☐ 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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 9AM-4PM

### CERTIFIED NURSE PRACTITIONER

#### **BINETTE, DONYA**

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653  
 NPI: 1427325166

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 2210 MESA DR STE 300 OCEANSIDE, CA 92054

📞 Phone: (760) 757-5841  
 📞 After Hours Phone: (760) 757-5841

🌐 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM SA 8AM-4:30PM

### CERTIFIED NURSE PRACTITIONER

#### **BINETTE, DONYA**

Provider ID: 480247

Provider Gender: Female

License Number: NP95001653  
 NPI: 1427325166

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

📍 2210 MESA DR STE 300

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

OCEANSIDE, CA 92054  
☎ Phone: (760) 757-5841  
🕒 After Hours Phone: (760) 757-5841  
🌐 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 8AM-4:30PM

### CERTIFIED NURSE PRACTITIONER

**BROMAN, GRETCHEN**  
Provider ID: 206341  
Provider Gender: Female  
License Number: NP95007885  
NPI: 1922421288  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 4700 N RIVER RD  
OCEANSIDE, CA 92057  
☎ Phone: (760) 631-5000  
🕒 After Hours Phone: (760) 631-5000  
🌐 Website: www.vistacommunityclinic.org  
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: 206341  
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☎ Phone: (760) 631-5000  
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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

**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

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## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206341

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
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### CERTIFIED NURSE PRACTITIONER

#### **BROMAN, GRETCHEN**

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N

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 Hours: M-F 8AM-5PM  
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### 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

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 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206341

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


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Cultural Competency: N

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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 206341

N

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM  
SA 9AM-4PM*


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### **CERTIFIED NURSE PRACTITIONER**


---



#### **CHRISTY, TYLER**

*Provider ID: 206341  
Provider Gender: Male  
License Number: NP95025871  
NPI: 1689094971*

 *Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 *4700 N RIVER RD  
OCEANSIDE, CA 92057*  
 *Phone: (760) 631-5000*  
 *After Hours Phone: (760)  
631-5000*

 *Website: www.vistacommu  
nityclinic.org*  
*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-5PM  
SA 9AM-4PM*

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### **CERTIFIED NURSE PRACTITIONER**

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#### **CHRISTY, TYLER**



*Provider ID: 206341  
Provider Gender: Male*


*License Number: NP95025871  
NPI: 1689094971*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Board Certified Specialty: No  
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631-5000*

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nityclinic.org*  
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*American Sign Language (ASL):  
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PROVIDER*

 *Hours: M-F 8AM-5PM  
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### **CERTIFIED NURSE PRACTITIONER**

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#### **CHRISTY, TYLER**

*Provider ID: 206341  
Provider Gender: Male  
License Number: NP95025871  
NPI: 1689094971*


 *Provider English Spoken: Y  
Cultural Competency: N*

*Board Certified Specialty: No  
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OCEANSIDE, CA 92057*


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 *After Hours Phone: (760)*


*631-5000*

 *Website: www.vistacommu  
nityclinic.org*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 9AM-4PM*

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### **CERTIFIED NURSE PRACTITIONER**

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#### **CORY, ALLISON**


*Provider ID: 206341  
Provider Gender: Female  
License Number: NP20497  
NPI: 1194027706*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*


 *4700 N RIVER RD  
OCEANSIDE, CA 92057*


 *Phone: (760) 631-5000*  
 *After Hours Phone: (760)  
631-5000*

 *Website: www.vistacommu  
nityclinic.org*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM  
SA 9AM-4PM*

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## C. 初级保健目录

<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>CORY, ALLISON</b>            Provider ID: 206341            Provider Gender: Female            License Number: NP20497            NPI: 1194027706</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 4700 N RIVER RD            OCEANSIDE, CA 92057   Phone: (760) 631-5000   After Hours Phone: (760) 631-5000   Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM            SA 9AM-4PM</p>	<p>Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 4700 N RIVER RD            OCEANSIDE, CA 92057   Phone: (760) 631-5000   After Hours Phone: (760) 631-5000   Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM            SA 9AM-4PM</p>	<p>Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM            SA 9AM-4PM</p>
<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>CORY, ALLISON</b>            Provider ID: 206341            Provider Gender: Female            License Number: NP20497            NPI: 1194027706</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N</p>	<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>EVERETT, ELIZABETH</b>            Provider ID: 206341            Provider Gender: Female            License Number: NP95025094            NPI: 1942952767</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Sign Language            Cultural Competency: N            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 4700 N RIVER RD            OCEANSIDE, CA 92057   Phone: (760) 631-5000   After Hours Phone: (760) 631-5000   Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM            SA 9AM-4PM</p>	<p align="center"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <p><b>EVERETT, ELIZABETH</b>            Provider ID: 206341            Provider Gender: Female            License Number: NP95025094            NPI: 1942952767</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Sign Language            Cultural Competency: N            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p> <p> 4700 N RIVER RD            OCEANSIDE, CA 92057   Phone: (760) 631-5000   After Hours Phone: (760) 631-5000   Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER   Hours: M-F 8AM-5PM            SA 9AM-4PM</p>

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## C. 初级保健目录

### **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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE** **PRACTITIONER**


#### **HALGEDAHL, YI 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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE** **PRACTITIONER**


#### **HALGEDAHL, YI 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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **CERTIFIED NURSE** **PRACTITIONER**

#### **HALGEDAHL, YI 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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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## C. 初级保健目录

 Hours: M-F 8AM-5PM

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### **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

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **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

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American Sign Language (ASL):

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **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

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Min/Max Age: 0\None

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Board Certified Specialty: No

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N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
 Hours: M-F 8AM-5PM  
 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.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM  
 SA 9AM-4PM


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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **HARRIS, PAMELA**

Provider ID: 206341  
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NPI: 1407545221  
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Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
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 PROVIDER

 Hours: M-F 8AM-5PM  
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### **CERTIFIED NURSE** **PRACTITIONER**

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 NPI: 1407545221

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Board Certified Specialty: No  
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[nityclinic.org](http://nityclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM  
 SA 9AM-4PM


---




### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **HOWELL, AMANDA**

Provider ID: 206341  
 Provider Gender: Female  
 License Number: NP95020894  
 NPI: 1427797943

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP


 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
 631-5000

 Website: [www.vistacommu  
nityclinic.org](http://www.vistacommu<br/>nityclinic.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-F 8AM-5PM  
 SA 9AM-4PM





















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### **CERTIFIED NURSE**

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## C. 初级保健目录

<b>PRACTITIONER</b>			
<b>HOWELL, AMANDA</b> Provider ID: 206341 Provider Gender: Female License Number: NP95020894 NPI: 1427797943 <input type="checkbox"/> 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: <a href="http://www.vistacommu&lt;br/&gt;nityclinic.org">www.vistacommu nityclinic.org</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM SA 9AM-4PM		
 4700 N RIVER RD OCEANSIDE, CA 92057  Phone: (760) 631-5000  After Hours Phone: (760) 631-5000  Website: <a href="http://www.vistacommu&lt;br/&gt;nityclinic.org">www.vistacommu nityclinic.org</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM SA 9AM-4PM	<th colspan="2"><b>CERTIFIED NURSE PRACTITIONER</b></th>	<b>CERTIFIED NURSE PRACTITIONER</b>	
<th colspan="2"><b>CERTIFIED NURSE PRACTITIONER</b></th>	<b>CERTIFIED NURSE PRACTITIONER</b>		
<b>HOWELL, AMANDA</b> Provider ID: 206341 Provider Gender: Female License Number: NP95020894 NPI: 1427797943 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	<b>KELLEHER, BRIDGET</b> Provider ID: 402434 Provider Gender: Female License Number: NP95003447 NPI: 1245695006 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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: <a href="http://www.vistacommu&lt;br/&gt;nityclinic.org">www.vistacommu nityclinic.org</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N	 818 PIER VIEW WAY OCEANSIDE, CA 92054  Phone: (760) 631-5000  After Hours Phone: (760) 631-5000  Website: <a href="http://www.vistacommu&lt;br/&gt;nityclinic.org">www.vistacommu nityclinic.org</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N		

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TU 8AM-5PM  
W 8AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM*


---




### **CERTIFIED NURSE PRACTITIONER**


---



#### **TAYLOR, CHRISTOPHER**

*Provider ID: 206341  
Provider Gender: Male  
License Number: NP95020584  
NPI: 1851747166*

 *Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 *4700 N RIVER RD  
OCEANSIDE, CA 92057*  
 *Phone: (760) 631-5000*  
 *After Hours Phone: (760)  
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*

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### **CERTIFIED NURSE PRACTITIONER**




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*Provider ID: 206341*

*Provider Gender: Male  
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NPI: 1851747166*

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Cultural Competency: N  
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Min/Max Age: 0\None  
American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM  
SA 9AM-4PM*


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### **CERTIFIED NURSE PRACTITIONER**



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NPI: 1851747166*

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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  
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*

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## C. 初级保健目录

SA 9AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

#### **WAGNER, TASIA**

Provider ID: 206341

Provider Gender: Female


License Number: NP95001650


NPI: 1598158768

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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OCEANSIDE, CA 92057

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 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

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#### **WAGNER, TASIA**

Provider ID: 206341

Provider Gender: Female

License Number: NP95001650


NPI: 1598158768


Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
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OCEANSIDE, CA 92057

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 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**

#### **ESPINOSA-SILVA, YAMINAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish



Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL  
ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

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Provider ID: 206341

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL  
ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

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## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

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**ESPINOSA-SILVA, YAMINAH**

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License Number: 20A12958

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Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: No  
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OCEANSIDE, CA 92057

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Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

### **FAMILY PRACTICE**


**FATLAND, SARAH**

Provider ID: 206341

Provider Gender: Female

License Number: 20A18374


NPI: 1831354026

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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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Min/Max Age: 0\None

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SA 9AM-4PM

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**FATLAND, SARAH**

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License Number: 20A18374


NPI: 1831354026


 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):




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## C. 初级保健目录

<p>N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM SA 9AM-4PM</i></p>	<p><i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM SA 9AM-4PM</i></p>	<p><i>nityclinic.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL):</i>            N</p>
<b><u>FAMILY PRACTICE</u></b>		
<b>KETCHEL, CLINT</b>		
<i>Provider ID: 206341</i>		
<i>Provider Gender: Male</i>		
<i>License Number: A135564</i>		
<i>NPI: 1699038125</i>		
<input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac</i>		
<i>Cultural Competency: N</i>		
<i>Hospital Affiliation:</i>		
SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER		
<i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i>		
 4700 N RIVER RD OCEANSIDE, CA 92057  <i>Phone: (760) 631-5000</i>  <i>After Hours Phone: (760) 631-5000</i>  <i>Website: www.vistacommunityclinic.org</i> <i>Medi-Cal Open Panel: Yes</i>		
<b><u>FAMILY PRACTICE</u></b>		
<b>KETCHEL, CLINT</b>		
<i>Provider ID: 206341</i>		
<i>Provider Gender: Male</i>		
<i>License Number: A135564</i>		
<i>NPI: 1699038125</i>		
<input type="checkbox"/> <i>Provider English Spoken: Y</i> <input type="checkbox"/> <i>Provider Language(s) Spoken: Arabic, Chaldean Neo-Aramaic, Spanish, Syriac</i>		
<i>Cultural Competency: N</i>		
<i>Hospital Affiliation:</i>		
SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER		
<i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i>		
 4700 N RIVER RD OCEANSIDE, CA 92057  <i>Phone: (760) 631-5000</i>  <i>After Hours Phone: (760) 631-5000</i>  <i>Website: www.vistacommunityclinic.org</i>		
<b><u>FAMILY PRACTICE</u></b>		
<b>KETCHEL, CLINT</b>		
<i>Provider ID: 206341</i>		
<i>Provider Gender: Male</i>		
<i>License Number: A135564</i>		
<i>NPI: 1699038125</i>		
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<i>Cultural Competency: N</i>		
<i>Hospital Affiliation:</i>		
SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, TRI CITY MEDICAL CTR, WHITTIER HOSPITAL MEDICAL CENTER		
<i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i>		
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## C. 初级保健目录

631-5000  
 Website: [www.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 9AM-4PM

### **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  
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 818 PIER VIEW WAY OCEANSIDE, CA 92054

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### **FAMILY PRACTICE**







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 Phone: (760) 631-5000  
 After Hours Phone: (760) 631-5000  
 Website: [www.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **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.vistacommu-nityclinic.org](http://www.vistacommu-nityclinic.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

SA 9AM-4PM

---

### **FAMILY PRACTICE**

---

#### **NGUYEN, DANIELA**

Provider ID: 206341

Provider Gender: Female


License Number: 20A21066


NPI: 1891069662

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **FAMILY PRACTICE**

---

#### **NGUYEN, DANIELA**

Provider ID: 206341

Provider Gender: Female

License Number: 20A21066


NPI: 1891069662


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000


 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

---

### **FAMILY PRACTICE**

---

#### **PANICKER, CIBU**

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

---

#### **PANICKER, CIBU**

Provider ID: 206341

Provider Gender: Male

License Number: A149340


NPI: 1235492760


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **FAMILY PRACTICE**

---

#### **PANICKER, CIBU**

Provider ID: 206341

Provider Gender: Male

License Number: A149340

NPI: 1235492760

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## C. 初级保健目录


 *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**

#### **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*






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 *Phone: (760) 631-5000*  
 *After Hours Phone: (760) 631-5000*  
 *Website: www.vistacommu  
nityclinic.org*  
*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  
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*

### **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.vistacommu  
nityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 9AM-4PM*

### **FQHC**

#### **VISTA COMMUNITY CLINIC,**

*Provider ID: 206341*  
*NPI: 1851300123*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*IHP OF SOUTHERN CAL-PHP*  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760) 631-5000*  
 *Website: www.vistacommu  
nityclinic.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

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## C. 初级保健目录








<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM SA 9AM-4PM</p>	<p> 517 N HORNE ST OCEANSIDE, CA 92054</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p> <p> After Hours Phone: (760) 631-5000</p> <p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p>	<p>PROVIDER</p> <p> Hours: M-F 8AM-5PM SA 9AM-4PM</p>
<b>FQHC</b>		
<p><b>VISTA COMMUNITY CLINIC,</b></p> <p>Provider ID: 206341</p> <p>NPI: 1649662719</p> <p> Provider English Spoken: Y Cultural Competency: N</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 4700 N RIVER RD OCEANSIDE, CA 92057</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p>	<p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM SA 9AM-4PM</p>	<p><b>FQHC</b></p> <p><b>VISTA COMMUNITY CLINIC</b></p> <p><b>PIER VIEW WAY,</b></p> <p>Provider ID: 402434</p> <p>NPI: 1629357355</p> <p> Provider English Spoken: Y Cultural Competency: N</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 818 PIER VIEW WAY OCEANSIDE, CA 92054</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p>
<b>FQHC</b>		
<p> After Hours Phone: (760) 631-5000</p> <p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8AM-5PM SA 9AM-4PM</p>	<p><b>FQHC</b></p> <p><b>VISTA COMMUNITY CLINIC</b></p> <p><b>HORNE STREET,</b></p> <p>Provider ID: 402436</p> <p>NPI: 1609094036</p> <p> Provider English Spoken: Y Cultural Competency: N</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 517 N HORNE ST OCEANSIDE, CA 92054</p> <p> Phone: (760) 631-5000</p> <p>Fax: (760) 414-3892</p>	<p> After Hours Phone: (760) 631-5000</p> <p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-TU 8AM-5PM W 8AM-7PM TH-F 8AM-5PM SA 9AM-4PM</p>
<b>FQHC</b>		
<p><b>VISTA COMMUNITY CLINIC</b></p> <p><b>HORNE STREET,</b></p> <p>Provider ID: 402436</p> <p>NPI: 1609094036</p> <p> Provider English Spoken: Y Cultural Competency: N</p> <p>IHP OF SOUTHERN CAL-PHP</p>	<p> Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT</p>	<p><b>FQHC</b></p> <p><b>VISTA COMMUNITY CLINIC</b></p> <p><b>PIER VIEW WAY,</b></p> <p>Provider ID: 402434</p> <p>NPI: 1629357355</p> <p> Provider English Spoken: Y Cultural Competency: N</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录







### IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU 8AM-5PM  
W 8AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

#### **INTERNAL MEDICINE**

### HASSANI, FARZANEH




Provider ID: 206341  
Provider Gender: Female  
License Number: C54458  
NPI: 1942204979  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Farsi,  
Persian, Urdu  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, TRI CITY MEDICAL  
CTR, UC DAVIS MEDICAL CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000  
 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM

#### **INTERNAL MEDICINE**



### HASSANI, FARZANEH

Provider ID: 206341  
Provider Gender: Female  
License Number: C54458  
NPI: 1942204979  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Arabic, Farsi,  
Persian, Urdu  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, TRI CITY MEDICAL  
CTR, UC DAVIS MEDICAL CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000

 Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM

#### **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

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 After Hours Phone: (760)  
631-5000  
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Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


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## C. 初级保健目录

American Sign Language (ASL): **CALHOUN, CHANELLE**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

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### **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**


---

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: 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**

---

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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)



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

Spoken: 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.vistacommu nityclinic.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **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.vistacommu nityclinic.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **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-0PM

### **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-0PM

### **PEDIATRICS**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### **MCCAMMACK, BRADLEY**

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### **PEDIATRICS**

### **MCCAMMACK, BRADLEY**

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### **PEDIATRICS**

### **MCCAMMACK, BRADLEY**

Provider ID: 206341

Provider Gender: Male

License Number: A130883

NPI: 1629368857

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4700 N RIVER RD  
OCEANSIDE, CA 92057

Phone: (760) 631-5000

Fax: (760) 414-3731

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### **PEDIATRICS**

### **MILLER, DONALD**

Provider ID: 433589

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

After Hours Phone: (760) 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  
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







了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录





*Cultural Competency: N*  
*Hospital Affiliation: TRI CITY MEDICAL CTR, 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](http://www.vistacommunityclinic.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 9AM-4PM





### **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](http://www.vistacommunityclinic.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 9AM-4PM

### **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](http://www.vistacommunityclinic.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM SA 9AM-4PM

### **PEDIATRICS**

**ZACHRY, ALISON**  
*Provider ID: 480247*  
*Provider Gender: Female*  
*License Number: A131678*  
*NPI: 1922402858*  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 2210 MESA DR STE 300  
 OCEANSIDE, CA 92054  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: N/A  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM SA 8AM-4:30PM</i></p> <hr/> <p><b>PEDIATRICS</b></p> <p><b>ZACHRY, ALISON</b></p> <p><i>Provider ID: 480247</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A131678</i></p> <p><i>NPI: 1922402858</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, TRI CITY MEDICAL CTR</i></p> <p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p> <p> 2210 MESA DR STE 300 OCEANSIDE, CA 92054</p> <p> <i>Phone: (760) 736-6767</i></p> <p> <i>After Hours Phone: (760) 736-6767</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM SA 8AM-4:30PM</i></p> <hr/> <p><b>PHYSICIANS ASSISTANT</b></p> <p><b>CHISWICK, GARY</b></p> <p><i>Provider ID: 480247</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: PA22667</i></p> <p><i>NPI: 1174964001</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: GROSSMONT HOSPITAL</i></p> <p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p> <p> 2210 MESA DR STE 300 OCEANSIDE, CA 92054</p> <p> <i>Phone: (760) 966-3306</i></p> <p> <i>After Hours Phone: (760) 966-3306</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>PHYSICIANS ASSISTANT</b></p> <p><b>RUSO, KRISTA</b></p> <p><i>Provider ID: 480247</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: PA53036</i></p> <p><i>NPI: 1922471192</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p> <p> 2210 MESA DR STE 300 OCEANSIDE, CA 92054</p> <p> <i>Phone: (760) 966-3306</i></p> <p> <i>After Hours Phone: (760) 966-3306</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>PHYSICIANS ASSISTANT</b></p> <p><b>RUSO, KRISTA</b></p> <p><i>Provider ID: 480247</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: PA53036</i></p> <p><i>NPI: 1922471192</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</i></p> <p> 2210 MESA DR STE 300 OCEANSIDE, CA 92054</p> <p> <i>Phone: (760) 966-3306</i></p> <p> <i>After Hours Phone: (760) 966-3306</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>
--

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## C. 初级保健目录

Provider ID: 480247

Provider Gender: Female

License Number: PA53036

NPI: 1922471192

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 300  
OCEANSIDE, CA 92054

Phone: (760) 966-3306

After Hours Phone: (760)  
966-3306

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### POWAY

#### FAMILY PRACTICE

##### KAUR, JATINDER

Provider ID: 481187

Provider Gender: Female

License Number: A120771

NPI: 1912141391

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, 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


Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, SCRIPPS MEMORIAL


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*HOSPITAL, 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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

Min/Max Age: 0\19

American Sign Language (ASL): Provider Gender: Male

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

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 15525 POMERADO RD STE B1  
POWAY, CA 92064

 Phone: (858) 487-8333

Fax: (858) 487-0856

 After Hours Phone: (858) 484-4003

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM  
SA 8:30AM-0PM

### **PHYSICIANS ASSISTANT**

#### **BALDWIN, DONNA**

Provider ID: 481187

Provider Gender: Female

License Number: PA23310







NPI: 1649692369

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP







了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 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

#### 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-0PM

#### INTERNAL MEDICINE






**YUNG, DORIS**  
 Provider ID: 449438  
 Provider Gender: Female  
 License Number: A89893  
 NPI: 1730386863  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Chinese, Mandarin,  
 Spanish  
 Cultural Competency: N

Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL  
 ENCINITAS

Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST  
 RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
 736-6767  
 Website: www.ihpsocal.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

#### PEDIATRICS


**ZACHRY, ALISON**  
 Provider ID: 449438  
 Provider Gender: Female  
 License Number: A131678  
 NPI: 1922402858  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, TRI CITY MEDICAL CTR  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 220 ROTANZI ST  
 RAMONA, CA 92065  
 Phone: (760) 736-6767  
 After Hours Phone: (760)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

### **PHYSICIANS ASSISTANT**

#### **CHISWICK, GARY**

Provider ID: 449438

Provider Gender: Male

License Number: PA22667

NPI: 1174964001


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST  
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **REIFENBERGER, JODY**

Provider ID: 449438

Provider Gender: Female


License Number: PA22669


NPI: 1386741072


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST  
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **RUSSO, KRISTA**

Provider ID: 449438

Provider Gender: Female


License Number: PA53036


NPI: 1922471192


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST  
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **ZANGEN, ROCHELLE**

Provider ID: 449438

Provider Gender: Female


License Number: PA51494


NPI: 1447681150


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 220 ROTANZI ST  
RAMONA, CA 92065

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **SAN DIEGO**

### **CARDIOVASCULAR DISEASE**

#### **BLUM, RICHARD**

Provider ID: 417937

Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: 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.operationsa  
mahan.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.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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录


<hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>ARTS, SERENA</b> 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</p> <hr/>	<p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>BELTRON, KIMBERLY</b> 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</p> <hr/>	<p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>BESTERFELDT, LYDIA</b> 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</p> <hr/>
<hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>BELEN, NEZER</b> 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</p>	<p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>BURNS, DELLA</b> Provider ID: 233597 Provider Gender: Female License Number: NP7413 NPI: 1871577023</p>	

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4290 POLK AVE  
 SAN DIEGO, CA 92105  
 Phone: (619) 563-0250  
 After Hours Phone: (619)  
 563-0250  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **CELESTIN-RAMSEY, AKANKE**

Provider ID: 451167  
 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](http://www.syhealth.org)


/clinics/king- chavez- health- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
 SA 8AM-4PM

### **CERTIFIED NURSE PRACTITIONER**

#### **CHASE, AVA LOU**

Provider ID: 206360  
 Provider Gender: Female  
 License Number: NP95000602  
 NPI: 1164496386

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):



N

 Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **DHARKAR-SURBER, SAPNA**

Provider ID: 185268  
 Provider Gender: Female  
 License Number: NP95013257  
 NPI: 1538707765

 Provider English Spoken: Y  
 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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-6PM  
 SA 8AM-2PM

### **CERTIFIED NURSE PRACTITIONER**

#### **GALLEGOS, CYNTHIA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Provider ID: 206360

Provider Gender: Female

License Number: 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

**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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Provider Language(s)*  
Spoken: Vietnamese  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

#### HA, THU


Provider ID: 482070

Provider Gender: Female

License Number: NP95010517


NPI: 1346443983


 *Provider English Spoken: Y*

 *Provider Language(s)*  
Spoken: Vietnamese  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

 After Hours Phone: (858)  
810-8700

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

.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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM  
SA 8AM-2PM

### CERTIFIED NURSE

### PRACTITIONER

#### 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

#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

235  
SAN DIEGO, CA 92126  
Phone: (844) 200-2426  
After Hours Phone: (844) 200-2426  
Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

### **CERTIFIED NURSE PRACTITIONER**

**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](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): NPI: 1205019510

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

### **CERTIFIED NURSE PRACTITIONER**

**HOANG, CHI**

Provider ID: 482070

Provider Gender: Female

License Number: NP95004600

NPI: 1902350994

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

After Hours Phone: (858) 810-8700

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNNJOY**

Provider ID: 206362

Provider Gender: Female

License Number: NP17852

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH  
8:30AM-5:30PM  
F 8AM-5PM

### **CERTIFIED NURSE PRACTITIONER**

**HOGAN, ROSELYNNJOY**

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

### SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER

### CERTIFIED NURSE PRACTITIONER


#### HOGAN, ROSELYNNJOY


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](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-TH  
 8:30AM-5:30PM  
 F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER



#### HORNEY, KRISTAN


Provider ID: 403583  
 Provider Gender: Female  
 License Number: NP95007712  
 NPI: 1720590904

Provider English Spoken: Y  
 Cultural Competency: N

Board Certified Specialty: No

 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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

 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)


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: 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 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111

Phone: (858) 279-0925

After Hours Phone: (858)  
 279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

Accessibility: CONTACT  
 PROVIDER

Hours: M-F  
 8:30AM-5:30PM  
 SA 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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

Accessibility: CONTACT  
 PROVIDER

Hours: M-F  
 8:30AM-5:30PM  
 SA 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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

Accessibility: CONTACT  
 PROVIDER

Hours: M-F  
 8:30AM-5:30PM

### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
 N

Accessibility: CONTACT  
 PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

#### **LIEBER, CAROL**

Provider ID: 517403

Provider Gender: Female

License Number: NP20849

NPI: 1487889846


Provider English Spoken: Y

Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

*Spoken: Spanish*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 316 25TH ST  
SAN DIEGO, CA 92102  
 *Phone: (619) 238-5551*  
 *After Hours Phone: (619)*  
*238-5551*  
 *Website: N/A*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*



### CERTIFIED NURSE PRACTITIONER

**LIM, IMELDA**  
*Provider ID: 417101*  
*Provider Gender: Female*  
*License Number: NP95000203*  
*NPI: 1093130395*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Tagalog*


*Cultural Competency: N*  
*Board Certified Specialty: No*  
*OPERATION SAMAHAN*




 10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126  
 *Phone: (844) 200-2426*  
 *After Hours Phone: (844)*  
*200-2426*  
 *Website: www.operationsa*  
*mahan.org*


*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-TU*  
*8:30AM-5:30PM*  
*W 10AM-7PM*  
*TH-F 8:30AM-5:30PM*

### CERTIFIED NURSE PRACTITIONER

**LU, TAMMY**  
*Provider ID: 206360*  
*Provider Gender: Female*  
*License Number: NP95007253*  
*NPI: 1457879132*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 *Phone: (619) 515-2300*  
 *After Hours Phone: (619)*  
*515-2300*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*


 *Accessibility: CONTACT*  
*PROVIDER*

### CERTIFIED NURSE

### PRACTITIONER

**MARTIN, RIA**  
*Provider ID: 206363*  
*Provider Gender: Female*  
*License Number: NP95005321*  
*NPI: 1437695079*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF*  
*SAN DIEGO*

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 *Phone: (619) 515-2560*  
 *After Hours Phone: (619)*  
*515-2560*



 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

### CERTIFIED NURSE PRACTITIONER


**MARTINEZ, CAROLYN**  
*Provider ID: 214492*  
*Provider Gender: Female*  
*License Number: NP22031*  
*NPI: 1609101997*

 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 1016 OUTER RD  
SAN DIEGO, CA 92154  
 Phone: (619) 429-3733  
 After Hours Phone: (619)  
429-3733  
 Website: [www.ibclinic.org](http://www.ibclinic.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N


 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5PM  
TU-TH 8:30AM-8PM  
F 8:30AM-5PM

### CERTIFIED NURSE PRACTITIONER


#### **MENDOZA, GRETTEL MARIE**

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](http://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](http://WWW.SDAIHC.ORG)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
Indian Health Services: Y

### CERTIFIED NURSE PRACTITIONER

#### **NEVAREZ, IRENE**

Provider ID: 185268  
Provider Gender: Female  
License Number: NP95009891

NPI: 1003166646

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N



Hospital Affiliation: UCSD LA


JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

 Phone: (619) 564-8765  
 After Hours Phone: (619)  
564-8765

 Website: [www.lamaestra.org](http://www.lamaestra.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM  
SA 8AM-2PM

### CERTIFIED NURSE PRACTITIONER

#### **NGUYEN, NINA**

Provider ID: 417101  
Provider Gender: Female  
License Number: NP95020179  
NPI: 1417699869

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## C. 初级保健目录



### OPERATION SAMAHAN

 10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126  
 Phone: (844) 200-2426  
 After Hours Phone: (844)  
200-2426  
 Website: [www.operationsamahan.org](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-4:30PM

#### **CERTIFIED NURSE PRACTITIONER**







### NOCEDA, ANA



Provider ID: 482070  
 Provider Gender: Female  
 License Number: NP19505  
 NPI: 1386971760  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
 Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858)  
810-8700

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

#### **CERTIFIED NURSE 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](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\22  
 American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM





#### **CERTIFIED NURSE PRACTITIONER**

### OCAMPO, ELAINE

Provider ID: 206046  
 Provider Gender: Female  
 License Number: NP95003427  
 NPI: 1063856805

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin, Yue  
Chinese

Cultural Competency: N  
 Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

#### **CERTIFIED NURSE PRACTITIONER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **OCAMPO, ELAINE**

Provider ID: 206046

Provider Gender: Female

License Number: NP95003427

NPI: 1063856805

Provider English Spoken: Y


Provider Language(s)  
Spoken: Mandarin, Yue  
Chinese


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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#### **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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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#### **CERTIFIED NURSE** **PRACTITIONER**

---

### **ODA, THAGHAR**

Provider ID: 206360

Provider Gender: Female

License Number: NP95000205

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)  
Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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#### **CERTIFIED NURSE** **PRACTITIONER**

---

### **ODA, THAGHAR**

Provider ID: 206360

Provider Gender: Female

License Number: RN810863

NPI: 1063835692

Provider English Spoken: Y


Provider Language(s)  
Spoken: Amharic, Arabic


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

#### **CERTIFIED NURSE** **PRACTITIONER**

---

### **ODA, THAGHAR**


Provider ID: 206363


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female  
License Number: NP95000205  
NPI: 1063835692

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Amharic, Arabic  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER



#### **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.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-4:30PM




### 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.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER



#### **OWEN, MICHAEL**

Provider ID: 206362  
Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


License Number: 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

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### **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: 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

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录


License Number: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**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) 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: 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

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**

**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**

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **ROGERS, TANYA**

Provider ID: 417987  
Provider Gender: Female  
License Number: NP95004443  
NPI: 1558710038

Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

4874 POLK AVE  
SAN DIEGO, CA 92105  
Phone: (619) 515-2426  
After Hours Phone: (619)  
515-2426  
Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

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### **CERTIFIED NURSE PRACTITIONER**

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#### **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

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### **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

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### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL): N

 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

#### **SAMPSON, ANDRIECE**

Provider ID: 207382


Provider Gender: Female


License Number: NP95026377  
NPI: 1619594124


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE  
SAN DIEGO, CA 92103

 Phone: (619) 234-2158


 After Hours Phone: (619)  
234-2158

 Website: WWW.SDAIHC.ORG

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

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## C. 初级保健目录

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM  
TU 8AM-8PM  
W-F 8AM-5PM  
SA 9AM-1PM



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### **CERTIFIED NURSE PRACTITIONER**

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#### **SATTERWHITE, MAURINE**


Provider ID: 206046  
Provider Gender: Female  
License Number: NP7022  
NPI: 1225012842

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925  
 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM

TU 8AM-8PM  
W-F 8AM-5PM  
SA 9AM-1PM



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### **CERTIFIED NURSE PRACTITIONER**

---



#### **SATTERWHITE, MAURINE**


Provider ID: 206046  
Provider Gender: Female  
License Number: NP7022  
NPI: 1225012842

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925  
 After Hours Phone: (858)  
279-0925


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM  
TU 8AM-8PM  
W-F 8AM-5PM  
SA 9AM-1PM



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### **CERTIFIED NURSE PRACTITIONER**

---



#### **SATTERWHITE, MAURINE**


Provider ID: 482070  
Provider Gender: Female  
License Number: NP7022  
NPI: 1225012842

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111


 Phone: (858) 810-8700  
 After Hours Phone: (858)  
810-8700

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM


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### **CERTIFIED NURSE PRACTITIONER**

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#### **SAVILLE, EDITH**

Provider ID: 417937  
Provider Gender: Female  
License Number: NP7374  
NPI: 1730567678


 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


### FAMILY HEALTH CENTERS OF SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619) 515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


 Hours: M-TH 8AM-9PM  
F 8AM-5PM

#### **CERTIFIED NURSE PRACTITIONER**

### SEAMAN, MARY

Provider ID: 206363  
Provider Gender: Female  
License Number: NP10146  
NPI: 1033116652  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619) 515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None




American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER

#### **CERTIFIED NURSE PRACTITIONER**

### SEBRING, JAN

Provider ID: 206360  
Provider Gender: Female  
License Number: RN486421  
NPI: 1295750339  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619) 515-2300


 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER


#### **CERTIFIED NURSE PRACTITIONER**

### SEBRING, JAN

Provider ID: 206360  
Provider Gender: Female  
License Number: NP10906  
NPI: 1295750339

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619) 515-2300


 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER


#### **CERTIFIED NURSE PRACTITIONER**

### TAYLOR, KAYLA

Provider ID: 206362  
Provider Gender: Female  
License Number: NP95006792  
NPI: 1730604414

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL): N  
License Number: NP95006792  
NPI: 1730604414

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **TAYLOR, KAYLA**

Provider ID: 417429

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

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)  
515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N  
License Number: NP95005999  
NPI: 1316478092

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **TAYLOR, KAYLA**

Provider ID: 206362


Provider Gender: Female


License Number: NP95006792  
NPI: 1730604414


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **TODD, MIKAYLA**

Provider ID: 517998

Provider Gender: Female

License Number: NP95005999


NPI: 1316478092

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 662-4100


 After Hours Phone: (619)  
662-4100

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **TRAN, KELLY**

Provider ID: 206360

Provider Gender: Female

License Number: NP95003689

NPI: 1255799276


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese


Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113


 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<b><u>CERTIFIED NURSE PRACTITIONER</u></b>
<b>TUEROS, VICTORIA</b> Provider ID: 206360 Provider Gender: Female License Number: NP2286 NPI: 1598989261 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 1809 NATIONAL AVE SAN DIEGO, CA 92113 <input type="checkbox"/> Phone: (619) 515-2300 <input type="checkbox"/> After Hours Phone: (619) 515-2300 <input type="checkbox"/> Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER
<b><u>CERTIFIED NURSE PRACTITIONER</u></b>
<b>VEGA, TERESA</b> Provider ID: 206360 Provider Gender: Female License Number: NP95001705 NPI: 1912304569 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish

Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 1809 NATIONAL AVE SAN DIEGO, CA 92113 <input type="checkbox"/> Phone: (619) 515-2300 <input type="checkbox"/> After Hours Phone: (619) 515-2300 <input type="checkbox"/> Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER
<b><u>CERTIFIED NURSE PRACTITIONER</u></b>
<b>VELASQUEZ, FERNANDO</b> Provider ID: 206360 Provider Gender: Male License Number: NP95011254 NPI: 1386195535 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 1809 NATIONAL AVE SAN DIEGO, CA 92113 <input type="checkbox"/> Phone: (619) 515-2300 <input type="checkbox"/> After Hours Phone: (619) 515-2300 <input type="checkbox"/> Website: www.fhcsd.org

<b><u>CERTIFIED NURSE PRACTITIONER</u></b>
<b>VELASQUEZ, FERNANDO</b> Provider ID: 206360 Provider Gender: Male License Number: NP95011254 NPI: 1386195535 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 1809 NATIONAL AVE SAN DIEGO, CA 92113 <input type="checkbox"/> Phone: (619) 515-2300 <input type="checkbox"/> After Hours Phone: (619) 515-2300 <input type="checkbox"/> Website: www.fhcsd.org

Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER
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<b><u>CERTIFIED NURSE PRACTITIONER</u></b>
<b>VELASQUEZ, FERNANDO</b> Provider ID: 419529 Provider Gender: Male License Number: NP95011254 NPI: 1386195535 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO <input type="checkbox"/> 2325 COMMERCIAL ST STE 1400 SAN DIEGO, CA 92113 <input type="checkbox"/> Phone: (619) 515-2422 <input type="checkbox"/> After Hours Phone: (619) 515-2422 <input type="checkbox"/> Website: www.fhcsd.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER

<b><u>CERTIFIED NURSE PRACTITIONER</u></b>
--

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## C. 初级保健目录

### **VILLALOBOS, REBECA**

Provider ID: 206360

Provider Gender: Female

License Number: NP95015780

NPI: 1184224396

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

### **WILLIAMS, TAKISHA**

Provider ID: 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

### **WILLIAMS, BREAHA**

Provider ID: 185268


Provider Gender: Female

License Number: NP95001840

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 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](http://www.lamaestra.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM  
SA 8AM-2PM

### **CERTIFIED NURSE PRACTITIONER**


#### **WOLF, CELIA**

Provider ID: 417937

Provider Gender: Female

License Number: NP95001899

NPI: 1245635564


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED REGISTERED NURSE MIDWIFE**


#### **BOSTON, LAURA**

Provider ID: 206360

Provider Gender: Female

License Number: NM792

NPI: 1174553259

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED REGISTERED NURSE MIDWIFE**

#### **GEPHSTEIN, YANA**

Provider ID: 402851

Provider Gender: Female

License Number: NM1662

NPI: 1396956512

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Hebrew


Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **CERTIFIED REGISTERED NURSE MIDWIFE**

#### **TOLMIE, SIMONE**

Provider ID: 206360

Provider Gender: Female

License Number: NM236263

NPI: 1104572007




 Provider English Spoken: Y



 Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录






*Spoken: Spanish*  
*Cultural Competency: N*  
*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-health-center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

### **CHIROPRACTOR**

#### **CABALLERO, JAMES**








*Provider ID: 417101*  
*Provider Gender: Male*  
*License Number: DC27726*  
*NPI: 1093991549*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**OPERATION SAMAHAN**

 10737 CAMINO RUIZ STE 235  
SAN DIEGO, CA 92126  
 *Phone: (844) 200-2426*  
 *After Hours Phone: (844) 200-2426*  
 *Website: www.operationsamahan.org*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-4:30PM*



### **CHIROPRACTOR**

#### **CABALLERO, JAMES**

*Provider ID: 418535*  
*Provider Gender: Male*  
*License Number: DC27726*  
*NPI: 1093991549*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**OPERATION SAMAHAN**  
 9995 CARMEL MOUNTAIN RD STE B10 AND B11  
SAN DIEGO, CA 92129  
 *Phone: (844) 200-2426*  
 *After Hours Phone: (844) 200-2426*  
 *Website: www.operationsamahan.org*  
*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: 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### OPERATION SAMAHAN

9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TU 8:30AM-5:30PM

W 10AM-7PM

TH-F 8:30AM-5:30PM

### CHIROPRACTOR

#### GILIBERTO, JOSEPH

Provider ID: 417101

Provider Gender: Male

License Number: DC15775

NPI: 1821463159

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

### OPERATION SAMAHAN

10737 CAMINO RUIZ STE 235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844) 200-2426

Website: [www.operationsamahan.org](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-4:30PM

### CHIROPRACTOR

#### HALEY, STEVEN

Provider ID: 185268

Provider Gender: Male

License Number: DC25697

NPI: 1083764484

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

### LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619) 280-4213

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### CHIROPRACTOR

### HOURIHAN, KEITH

Provider ID: 185268

Provider Gender: Male

License Number: DC29314

NPI: 1306916994

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

### LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE SAN DIEGO, CA 92105

Phone: (619) 280-4213

After Hours Phone: (619) 280-4213

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### CHIROPRACTOR

#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### MEDICAL CENTER

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

Phone: (619) 798-3947

After Hours Phone: (619)  
798-3947

Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### CHIROPRACTOR

#### KAZEM, AHMAD

Provider ID: 227409

Provider Gender: Male

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](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM

### CHIROPRACTOR

#### OLSEN, MARTIN

Provider ID: 402851

Provider Gender: Male

License Number: DC20729

NPI: 1730247990

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3705 MISSION BLVD  
SAN DIEGO, CA 92109

Phone: (619) 515-2444

After Hours Phone: (619)  
515-2444

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

#### PAGE, BIANCA

Provider ID: 417937

Provider Gender: Female

License Number: DC33688

NPI: 1649787607







Provider English Spoken: Y

Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
515-2545  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-9PM  
F 8AM-5PM


### **CHIROPRACTOR**







**ROJAS, RICHARD**  
Provider ID: 417937  
Provider Gender: Male  
License Number: DC31024  
NPI: 1538318811  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
515-2545  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 9AM-5PM

### **CHIROPRACTOR**






**SOSA, DAVID**  
Provider ID: 417937  
Provider Gender: Male  
License Number: DC33150  
NPI: 1013308675  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
515-2545  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TH 8AM-9PM  
F 8AM-5PM



### **CHIROPRACTOR**

**SOSA, DAVID**  
Provider ID: 206363  
Provider Gender: Male  
License Number: DC33150  
NPI: 1013308675  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619)  
515-2560  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER





























### **CHIROPRACTOR**

**TAGHIZADEH, MAJID**  
Provider ID: 417937  
Provider Gender: Male  
License Number: DC30121  
NPI: 1750590600  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Farsi, Persian,  
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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8:30AM-5:30PM</i></p> <hr/> <p style="text-align: center;"><b><u>CHIROPRACTOR</u></b></p> <p><b>TRUONG, VENNES</b></p> <p><i>Provider ID: 417101</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: DC34907</i></p> <p><i>NPI: 1053919928</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><b>OPERATION SAMAHAN</b></p> <p> 10737 CAMINO RUIZ STE 235 SAN DIEGO, CA 92126</p> <p> <i>Phone: (844) 200-2426</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p> <i>Website: www.operationsamahan.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-4:30PM</i></p> <hr/> <p style="text-align: center;"><b><u>CLINIC OUTPATIENT</u></b></p> <p><b>OPERATION SAMAHAN</b></p> <p><b>RANCHO PENASQUITOS,</b></p> <p><i>Provider ID: 418535</i></p> <p><i>NPI: 1699216622</i></p>	<p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><b>OPERATION SAMAHAN</b></p> <p> 9995 CARMEL MOUNTAIN RD STE B10 AND B11 SAN DIEGO, CA 92129</p> <p> <i>Phone: (844) 200-2426</i></p> <p><i>Fax: (858) 695-9074</i></p> <p> <i>After Hours Phone: (844) 200-2426</i></p> <p> <i>Website: www.operationsamahan.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TU 8:30AM-5:30PM</i></p> <p><i>W 10AM-7PM</i></p> <p><i>TH-F 8:30AM-5:30PM</i></p> <hr/> <p style="text-align: center;"><b><u>DERMATOLOGY</u></b></p> <p><b>BURROWS, WILLIAM</b></p> <p><i>Provider ID: 417937</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: G16236</i></p> <p><i>NPI: 1639199292</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS GREEN HOSPITAL, SCRIPPS MERCY HOSPITAL</i></p> <p><i>Board Certified Specialty: No</i></p> <p><b>FAMILY HEALTH CENTERS OF SAN DIEGO</b></p>	<p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> <i>Phone: (619) 515-2545</i></p> <p> <i>After Hours Phone: (619) 515-2545</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><b><u>DERMATOLOGY</u></b></p> <p><b>CARTER, NATASHA</b></p> <p><i>Provider ID: 206363</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A140912</i></p> <p><i>NPI: 1033539184</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i></p> <p><i>Board Certified Specialty: No</i></p> <p><b>FAMILY HEALTH CENTERS OF SAN DIEGO</b></p> <p> 4725 MARKET ST SAN DIEGO, CA 92102</p> <p> <i>Phone: (619) 515-2560</i></p> <p> <i>After Hours Phone: (619) 515-2560</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### ENDOCRINOLOGY

### METABOLISM DIABETES

#### 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, CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM

TU-TH 8AM-6PM

F 8AM-5:30PM

### ENDOCRINOLOGY

### METABOLISM DIABETES

#### CHANG, AMY

Provider ID: 206360

Provider Gender: Female

License Number: A93385


NPI: 1750568911


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SADDLEBACK MEMORIAL MED CTR, SCRIPPS GREEN HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### ENDOCRINOLOGY

### METABOLISM DIABETES

#### GANDHI, ANAND

Provider ID: 206360

Provider Gender: Male

License Number: A178494

NPI: 1821651779

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### FAMILY HEALTH CENTERS OF SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113

Phone: (619) 515-2300

Fax: (619) 515-2510

After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

#### 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### ENDOCRINOLOGY

#### METABOLISM DIABETES

### LEVINE, MATTHEW

Provider ID: 206360

Provider Gender: Male

License Number: A77126

NPI: 1801994231

Provider English Spoken: Y

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

#### ENDOCRINOLOGY

#### METABOLISM DIABETES

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Hospital Affiliation: SCRIPPS 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 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): NPI: 1588197826

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

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### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

#### **ALVAREZ-ESTRADA, MIGUEL**

Provider ID: 227409

Provider Gender: Male

License Number: A157505

 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

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### **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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### **FAMILY PRACTICE**

#### **BAGINGITO, AUSTIN**

Provider ID: 417937

Provider Gender: Male

License Number: A163977


NPI: 1942705637


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes



Min/Max Age: 0\None

American Sign Language (ASL):

N


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录


 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **FAMILY PRACTICE**


#### **BAGINGITO, AUSTIN**

Provider ID: 417429  
Provider Gender: Male  
License Number: A163977  
NPI: 1942705637  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101  
 Phone: (619) 515-2525  
 After Hours Phone: (619)  
515-2525

 Website: www.fhcsd.org  
Medi-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**

#### **BAGINGITO, AUSTIN**

Provider ID: 206360  
Provider Gender: Male  
License Number: A163977  
NPI: 1942705637

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO



 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

NPI: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

1016 OUTER RD  
SAN DIEGO, CA 92154

Phone: (619) 429-3733

After Hours Phone: (619)  
429-3733

Website: [www.ibclinic.org](http://www.ibclinic.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-5PM  
TU-TH 8:30AM-8PM  
F 8:30AM-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

Website: [www.fhcsd.org](http://www.fhcsd.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **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](http://www.fhcsd.org)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **FAMILY PRACTICE**

#### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


### FAMILY HEALTH CENTERS OF SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109  
 Phone: (619) 515-2444  
 After Hours Phone: (619) 515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER

 Hours: M-W  
8:30AM-5:30PM  
TH 9AM-6PM  
F 8:30AM-5:30PM

#### **FAMILY PRACTICE**

### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM  
TU-TH 8AM-6PM  
F 8AM-5:30PM  
SA 8AM-5PM

#### **FAMILY PRACTICE**


### **BURTON, LUCAS**

Provider ID: 206362  
Provider Gender: Male  
License Number: 20A20786  
NPI: 1376171520

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N



 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

#### **FAMILY PRACTICE**


### **BURTON, LUCAS**

Provider ID: 206362  
Provider Gender: Male  
License Number: 20A20786  
NPI: 1376171520

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

#### **FAMILY PRACTICE**

### **CAMPBELL, BRIANNA**

Provider ID: 451167  
Provider Gender: Female  
License Number: A157488  
NPI: 1316479892

 Provider English Spoken: Y  
 Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Spoken: Spanish  
Cultural Competency: N  
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](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **CAMPOS, PRISCILLA**

Provider ID: 206360  
Provider Gender: Female  
License Number: A152651  
NPI: 1508217399

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **CARRIEDO-CENICEROS, MARIA**

Provider ID: 227409  
Provider Gender: Female  
License Number: A78373  
NPI: 1295746618

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **CHOU, BILL**

Provider ID: 206362  
Provider Gender: Male  
License Number: 20A14794  
NPI: 1730448101

Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

📞 After Hours Phone: (619) 515-2424

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

### **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](http://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](http://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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: SU-SA  
8:30AM-5:30PM

### **FAMILY PRACTICE**

#### **COLLINS, WILLIAM**

Provider ID: 206362

Provider Gender: Male

License Number: 20A15413

NPI: 1417361973

🗨️ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

📍 3544 30TH ST  
SAN DIEGO, CA 92104

📞 Phone: (619) 515-2424

📞 After Hours Phone: (619) 515-2424

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: 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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: SU-SA 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


#### **DAPPEN, AMANDA**

Provider ID: 227409

Provider Gender: Female

License Number: A153414

NPI: 1689037111


 Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**

#### **DAVIS, DEIRDRE**

Provider ID: 451167

Provider Gender: Female

License Number: A165432

NPI: 1265921365

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-F 8AM-5PM  
SA 8AM-4PM

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### **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](http://www.fhcsd.org)

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0\None

**American Sign Language (ASL):**

N

 **Accessibility:** CONTACT  
PROVIDER

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### **FAMILY PRACTICE**


#### **FAMBRO, CYNTHIA**

**Provider ID:** 451167

**Provider Gender:** Female

**License Number:** A153223

**NPI:** 1710331707


 **Provider English Spoken:** Y


 **Provider Language(s)  
Spoken:** Spanish


**Cultural Competency:** N

**Board Certified Specialty:** No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 **Phone:** (619) 662-4100

 **After Hours Phone:** (619)  
662-4100

 **Website:** [www.syhealth.org/  
/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0\None

**American Sign Language (ASL):**

 **Accessibility:** CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

#### **FLORES, JOE**

**Provider ID:** 417937


**Provider Gender:** Male

**License Number:** A171135


**NPI:** 1033647409


 **Provider English Spoken:** Y  
**Cultural Competency:** N

**Board Certified Specialty:** No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 **Phone:** (619) 515-2545

 **After Hours Phone:** (619)  
515-2545

 **Website:** [www.fhcsd.org](http://www.fhcsd.org)


**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0\None

**American Sign Language (ASL):**

N

 **Accessibility:** CONTACT  
PROVIDER

 **Hours:** M-TH 8AM-9PM  
F 8AM-5PM

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### **FAMILY PRACTICE**

#### **GLEASON ROHRER, GWEN**

**Provider ID:** 233597

**Provider Gender:** Female

**License Number:** A112176

**NPI:** 1710140462

 **Provider English Spoken:** Y


 **Provider Language(s)  
Spoken:** Spanish


**Cultural Competency:** N

**Hospital Affiliation:** UCSD  
MEDICAL CTR

**Board Certified Specialty:** No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE  
SAN DIEGO, CA 92105

 **Phone:** (619) 563-0250

 **After Hours Phone:** (619)  
563-0250

 **Website:** [www.sdfamilycare.org](http://www.sdfamilycare.org)






























**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0\None

**American Sign Language (ASL):**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>GLEASON ROHRER, GWEN</b> Provider ID: 233532 Provider Gender: Female License Number: A112176 NPI: 1710140462</p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP</p> <p> 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105  <i>Phone: (619) 280-2058</i>  <i>After Hours Phone: (619) 280-2058</i>  <i>Website: www.sdfamilycare.org</i> Medi-Cal Open Panel: Yes Min/Max Age: 0\22 American Sign Language (ASL): N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>GRIFFITHS, KENNETH</b> Provider ID: 417937 Provider Gender: Male</p>	<p><i>License Number: C52451</i> <i>NPI: 1760563068</i></p> <p> <i>Provider English Spoken: Y</i> Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103  <i>Phone: (619) 515-2545</i>  <i>After Hours Phone: (619) 515-2545</i>  <i>Website: www.fhcsd.org</i> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-TH 8AM-9PM F 8AM-5PM</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>GUTIERREZ, TANIA</b> Provider ID: 417987 Provider Gender: Female License Number: 20A19345 NPI: 1285196311</p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p> 4874 POLK AVE SAN DIEGO, CA 92105  <i>Phone: (619) 515-2426</i>  <i>After Hours Phone: (619) 515-2426</i>  <i>Website: www.fhcsd.org</i> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8:30AM-5:30PM</i></p> <hr/> <p><b>FAMILY PRACTICE</b></p> <p><b>HAMILTON, LISA MARIE</b> Provider ID: 418142 Provider Gender: Female License Number: 20A14772 NPI: 1235576059</p> <p> <i>Provider English Spoken: Y</i> Cultural Competency: N Board Certified Specialty: No FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 5160 FEDERAL BLVD SAN DIEGO, CA 92105  <i>Phone: (619) 515-2454</i>  <i>After Hours Phone: (619) 515-2454</i>  <i>Website: www.fhcsd.org</i> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Hours: M-F  
8:30AM-5:30PM

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### **FAMILY PRACTICE**

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#### **HAMILTON, LISA MARIE**

Provider ID: 206363

Provider Gender: Female


License Number: 20A14772


NPI: 1235576059

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### **FAMILY PRACTICE**

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#### **HEINRICI, ALEKA**


Provider ID: 451167

Provider Gender: Female

License Number: A125329

NPI: 1780979120

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Spanish  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4PM

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### **FAMILY PRACTICE**

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#### **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](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

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#### **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




















了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

PROVIDER		
<b><u>FAMILY PRACTICE</u></b>		
<b>KAUFMAN, JENNIFER CHILYN</b>	<p>Provider ID: 417987</p> <p>Provider Gender: Female</p> <p>License Number: G149974</p> <p>NPI: 1407818768</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Mandarin</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 4874 POLK AVE SAN DIEGO, CA 92105</p> <p> Phone: (619) 515-2426</p> <p> After Hours Phone: (619) 515-2426</p> <p> Website: www.fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-F 8:30AM-5:30PM</p>	<p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, RADY CHILDRENS HOSPITAL SAN DIEGO</p> <p>Board Certified Specialty: No</p> <p>FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 4725 MARKET ST SAN DIEGO, CA 92102</p> <p> Phone: (619) 515-2560</p> <p>Fax: (619) 263-2499</p> <p> After Hours Phone: (619) 515-2560</p> <p> Website: www.fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>
<b><u>FAMILY PRACTICE</u></b>		
<b>KEFLEZIGHI, BAHGHI</b>	<p>Provider ID: 206363</p> <p>Provider Gender: Female</p> <p>License Number: A100391</p> <p>NPI: 1124210844</p> <p> Provider English Spoken: Y</p>	<p> 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: <a href="https://www.syhealth.org/locations">https://www.syhealth.org/locations</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>
<b><u>FAMILY PRACTICE</u></b>		
<b>KIDDER, BRENDAN</b>	<p>Provider ID: 227409</p> <p>Provider Gender: Male</p> <p>License Number: A112379</p> <p>NPI: 1275793929</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>IHP OF SOUTHERN CAL-PHP</p>	<p> 3544 30TH ST SAN DIEGO, CA 92104</p> <p> Phone: (619) 515-2424</p> <p> After Hours Phone: (619) 515-2424</p> <p> Website: www.fhcsd.org</p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>
<b><u>FAMILY PRACTICE</u></b>		
<b>LACH, REBECCA</b>	<p>Provider ID: 206362</p> <p>Provider Gender: Female</p> <p>License Number: A177922</p> <p>NPI: 1679137780</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p> 3177 OCEAN VIEW BLVD SAN DIEGO, CA 92113</p> <p> Phone: (619) 662-4100</p> <p> After Hours Phone: (619) 662-4100</p> <p> Website: <a href="https://www.syhealth.org/locations">https://www.syhealth.org/locations</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


PROVIDER		
<b><u>FAMILY PRACTICE</u></b>		
<b>LACH, REBECCA</b>	<i>Cultural Competency: N</i>	<i>Medi-Cal Open Panel: Yes</i>
<i>Provider ID: 206362</i>	<i>Board Certified Specialty: No</i>	<i>Min/Max Age: 0\None</i>
<i>Provider Gender: Female</i>	<b>FAMILY HEALTH CENTERS OF</b>	<i>American Sign Language (ASL):</i>
<i>License Number: A177922</i>	<b>SAN DIEGO</b>	<i>N</i>
<i>NPI: 1679137780</i>	 4094 4TH AVE	 <i>Accessibility: CONTACT</i>
 <i>Provider English Spoken: Y</i>	SAN DIEGO, CA 92103	<i>PROVIDER</i>
 <i>Provider Language(s)</i>	 <i>Phone: (619) 515-2545</i>	
<i>Spoken: Spanish</i>	 <i>After Hours Phone: (619)</i>	
<i>Cultural Competency: N</i>	515-2545	
<i>Board Certified Specialty: No</i>	 <i>Website: www.fhcsd.org</i>	
<b>FAMILY HEALTH CENTERS OF</b>	<i>Medi-Cal Open Panel: Yes</i>	
<b>SAN DIEGO</b>	<i>Min/Max Age: 0\None</i>	
 3544 30TH ST	<i>American Sign Language (ASL):</i>	
SAN DIEGO, CA 92104	<i>N</i>	
 <i>Phone: (619) 515-2424</i>	 <i>Accessibility: CONTACT</i>	
 <i>After Hours Phone: (619)</i>	<i>PROVIDER</i>	
515-2424	 <i>Hours: M-TH 8AM-9PM</i>	
 <i>Website: www.fhcsd.org</i>	F 8AM-5PM	
<i>Medi-Cal Open Panel: Yes</i>	<b><u>FAMILY PRACTICE</u></b>	
<i>Min/Max Age: 0\None</i>	<b>LEE, SANDRINE</b>	
<i>American Sign Language (ASL):</i>	<i>Provider ID: 206362</i>	
<i>N</i>	<i>Provider Gender: Female</i>	
 <i>Accessibility: CONTACT</i>	<i>License Number: 20A15068</i>	
<i>PROVIDER</i>	<i>NPI: 1073909651</i>	
	 <i>Provider English Spoken: Y</i>	
	 <i>Provider Language(s)</i>	
	<i>Spoken: French</i>	
	<i>Cultural Competency: N</i>	
	<i>Board Certified Specialty: No</i>	
	<b>FAMILY HEALTH CENTERS OF</b>	
	<b>SAN DIEGO</b>	
	 3544 30TH ST	
	SAN DIEGO, CA 92104	
	 <i>Phone: (619) 515-2424</i>	
	 <i>After Hours Phone: (619)</i>	
	515-2424	
	 <i>Website: www.fhcsd.org</i>	
	<i>Medi-Cal Open Panel: Yes</i>	
	<i>Min/Max Age: 0\None</i>	
	<i>American Sign Language (ASL):</i>	
	<i>N</i>	
	 <i>Accessibility: CONTACT</i>	
	<i>PROVIDER</i>	
	<b><u>FAMILY PRACTICE</u></b>	
	<b>LINDEMAN, KURTIS</b>	
	<i>Provider ID: 403583</i>	
	<i>Provider Gender: Male</i>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: A104052

NPI: 1124155791

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL


CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE

SAN DIEGO, CA 92101

 Phone: (619) 233-8500

 After Hours Phone: (619)  
233-8500

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

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### **FAMILY PRACTICE**

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**LISH, JONATHAN**

Provider ID: 206360

Provider Gender: Male

License Number: A177373

NPI: 1811459456


 Provider English Spoken: Y


Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

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### **FAMILY PRACTICE**

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**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

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### **FAMILY PRACTICE**

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**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

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### **FAMILY PRACTICE**

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**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

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: 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

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: 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**

**MATICH, BRANKO**

Provider ID: 482070

Provider Gender: Male

License Number: C174985

NPI: 1023437704

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858)  
 810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-8:30PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

### **FAMILY PRACTICE**


#### **MATICH, BRANKO**

Provider ID: 206046


Provider Gender: Male


License Number: C174985

NPI: 1023437704

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **FAMILY PRACTICE**


#### **MATICH, BRANKO**

Provider ID: 206046


Provider Gender: Male


License Number: C174985

NPI: 1023437704

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925


 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **FAMILY PRACTICE**


#### **MCLAUGHLIN, ERIK**

Provider ID: 207382


Provider Gender: Male


License Number: C176574

NPI: 1861637217

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 2630 1ST AVE  
 SAN DIEGO, CA 92103

 Phone: (619) 234-2158

 After Hours Phone: (619)  
234-2158

 Website: [WWW.SDAIHC.ORG](http://WWW.SDAIHC.ORG)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 3705 MISSION BLVD  
SAN DIEGO, CA 92109  
 Phone: (619) 515-2444  
 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER




 Hours: M-W  
8:30AM-5:30PM  
TH 9AM-6PM  
F 8:30AM-5:30PM


### **FAMILY PRACTICE**

#### **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, VANESSAMARIA**


Provider ID: 631494  
Provider Gender: Female  
License Number: A113624  
NPI: 1952563421

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Filipino, Spanish,  
Tagalog

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SHARP CHULA VISTA  
MED CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N



 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **NGUYEN, NGOC**


Provider ID: 517998  
Provider Gender: Male

License Number: A74094  
NPI: 1184668105

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish,  
Vietnamese

Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100



 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 4094 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619) 515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

*American Sign Language (ASL): N*

 Accessibility: CONTACT PROVIDER

 Hours: M-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](http://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](http://www.operationsamahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

*American Sign Language (ASL): N*

 Accessibility: CONTACT PROVIDER

 Hours: M-F 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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录

 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  
 After Hours Phone: (619)  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **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**


#### **RAMIREZ, CRISTHIAN**

Provider ID: 206360

Provider Gender: Female

License Number: 20A17478

NPI: 1407200942


 Provider English Spoken: Y

 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300


 After Hours Phone: (619) 515-2300

 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-7PM  
TU-TH 8AM-6PM

F 8AM-5:30PM

SA 8AM-5PM

### **FAMILY PRACTICE**

#### **RIDGE, NEAL**

Provider ID: 631494

Provider Gender: Male


License Number: 20A6920


NPI: 1053381004

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: www.syhealth.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **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-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

#### **FAMILY PRACTICE**


### **RODRIGUEZ, SEAN**


Provider ID: 227409

Provider Gender: Male

License Number: A120576

NPI: 1780909903


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3177 OCEAN VIEW BLVD  
SAN DIEGO, CA 92113

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

#### **FAMILY PRACTICE**


### **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](http://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](http://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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 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**

**SCOTT, LAGINA**  
*Provider ID: 206360*  
*Provider Gender: Female*  
*License Number: A160489*  
*NPI: 1558897009*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**  
 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 *Phone: (619) 515-2300*  
 *After Hours Phone: (619) 515-2300*  
 *Website: www.fhcsd.org*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: A163512

N

 Accessibility: CONTACT PROVIDER

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### **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](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **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](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\22

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

---

### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

#### **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](http://www.fhcsd.org)






























Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p>N   <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><b><u>FAMILY PRACTICE</u></b></p> <p><b>SMOOT, CHARLES</b>  <i>Provider ID: 356145</i>  <i>Provider Gender: Male</i>  <i>License Number: A97036</i>  <i>NPI: 1245490358</i></p> <p> <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i>  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>   2391 ISLAND AVE  SAN DIEGO, CA 92102   <i>Phone: (619) 515-2435</i>   <i>After Hours Phone: (619) 515-2435</i>   <i>Website: N/A</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><b><u>FAMILY PRACTICE</u></b></p> <p><b>SMOOT, CHARLES</b>  <i>Provider ID: 206360</i>  <i>Provider Gender: Male</i>  <i>License Number: A97036</i>  <i>NPI: 1245490358</i></p> <p> <i>Provider English Spoken: Y</i></p>	<p> <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i>  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>   1809 NATIONAL AVE  SAN DIEGO, CA 92113   <i>Phone: (619) 515-2300</i>   <i>After Hours Phone: (619) 515-2300</i>   <i>Website: www.fhcsd.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 9AM-5PM</i></p> <hr/> <p style="text-align: center;"><b><u>FAMILY PRACTICE</u></b></p> <p><b>SNYDER, CHRISTOPHER</b>  <i>Provider ID: 517998</i>  <i>Provider Gender: Male</i>  <i>License Number: 20A7502</i>  <i>NPI: 1922041235</i></p> <p> <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: PIH</i>  <b>Hospital - Downey, JOHN F KENNEDY MEMORIAL HOSP, CEDARS SINAI MEDICAL CENTER, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, EISENHOWER MEDICAL CTR,</b></p>	<p><b>GROSSMONT HOSPITAL</b>  <i>Board Certified Specialty: No</i>  <b>IHP OF SOUTHERN CAL-PHP</b>   4690 EL CAJON BLVD  SAN DIEGO, CA 92115   <i>Phone: (619) 662-4100</i>   <i>After Hours Phone: (619) 662-4100</i>   <i>Website: N/A</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p style="text-align: center;"><b><u>FAMILY PRACTICE</u></b></p> <p><b>SOPHY, ELIZABETH</b>  <i>Provider ID: 403583</i>  <i>Provider Gender: Female</i>  <i>License Number: A157547</i>  <i>NPI: 1013441203</i></p> <p> <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Spanish</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: SCRIPPS</i>  <b>MERCY HOSPITAL CHULA VISTA</b>  <i>Board Certified Specialty: No</i>  <b>IHP OF SOUTHERN CAL-PHP</b>   1501 IMPERIAL AVE  SAN DIEGO, CA 92101   <i>Phone: (619) 233-8500</i>   <i>After Hours Phone: (619) 233-8500</i>   <i>Website: N/A</i></p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM

### **FAMILY PRACTICE**


#### **SUMMERS-DAY, COURTNEY**

Provider ID: 214492

Provider Gender: Female

License Number: A112781

NPI: 1124288873

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD  
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

 After Hours Phone: (619)  
429-3733


 Website: www.ibclinic.org

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

☎ After Hours Phone: (619) 515-2545

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### **FAMILY PRACTICE**

#### **THOMAS, ZACHARY**

Provider ID: 417987

Provider Gender: Male

License Number: A145023

NPI: 1326453119

☑ Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 4874 POLK AVE  
SAN DIEGO, CA 92105

☎ Phone: (619) 515-2426

☎ After Hours Phone: (619) 515-2426

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

#### **TRAN, 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

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### **FAMILY PRACTICE**

#### **TRAN, TONNIA**

Provider ID: 233597

Provider Gender: Female

License Number: 20A7662

NPI: 1982746657

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4290 POLK AVE  
SAN DIEGO, CA 92105

☎ Phone: (619) 563-0250

☎ After Hours Phone: (619) 563-0250

🌐 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

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### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER



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### **FAMILY PRACTICE**

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#### **TSUCHIYA, KIMIKO**

Provider ID: 417782  
Provider Gender: Female  
License Number: 20A19610  
NPI: 1629637285  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1250 6TH AVE STE 100  
SAN DIEGO, CA 92101  
 Phone: (619) 515-2430  
 After Hours Phone: (619)  
515-2430  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM



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### **FAMILY PRACTICE**

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#### **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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER





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### **FAMILY PRACTICE**

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#### **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

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### **FAMILY PRACTICE**


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#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**PROVIDER**  
 Hours: M-F 8AM-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.syhealth.org/locations>  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **FAMILY PRACTICE**


#### **WU, JENNIFER**






Provider ID: 403583  
 Provider Gender: Female  
 License Number: A54702  
 NPI: 1215953013

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Mandarin, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: UCSD  
 MEDICAL CTR, UCSD LA  
 JOLLA JOHN SALLY  
 THORNTON  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1501 IMPERIAL AVE  
 SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
 After Hours Phone: (619)  
 233-8500  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8:30AM-5PM

### **FAMILY PRACTICE**







#### **ZAHLER, MARVIN**

Provider ID: 417937  
 Provider Gender: Male  
 License Number: 20A11612  
 NPI: 1134380710  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 4094 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
 515-2545  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER


### **FAMILY PRACTICE**


#### **ZINK, IRENE**

Provider ID: 227409  
 Provider Gender: Female  
 License Number: C54198  
 NPI: 1215959549  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: German  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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### FQHC

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#### **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*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

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### FQHC

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#### **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*

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### FQHC

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#### **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*

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### FQHC

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#### **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*

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### FQHC

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#### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

📞 *After Hours Phone: (619) 515-2454*

🌐 *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*

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### 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  
 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*

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### 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*

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### 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

FQHC		FQHC
<p><b>FAMILY HLTH CTR SD HILLCREST,</b>  <i>Provider ID: 417937</i>  <i>NPI: 1629456900</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>   4094 4TH AVE            SAN DIEGO, CA 92103   <i>Phone: (619) 515-2545</i>  <i>Fax: (619) 501-9645</i>   <i>After Hours Phone: (619) 515-2545</i>   <i>Website: www.fhcsd.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-TH 8AM-9PM</i>  <i>F 8AM-5PM</i></p>	<p> <i>After Hours Phone: (619) 662-4100</i>   <i>Website: www.syhealth.org /clinics/king-chavez-health-center</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM</i>  <i>SA 8AM-4PM</i></p>	<p><b>LINDA VISTA HEALTH CARE CTR,</b>  <i>Provider ID: 206046</i>  <i>NPI: 1780665877</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <b>IHP OF SOUTHERN CAL-PHP</b>   6973 LINDA VISTA RD            SAN DIEGO, CA 92111   <i>Phone: (858) 279-0925</i>  <i>Fax: (858) 633-4680</i>   <i>After Hours Phone: (858) 279-0925</i>   <i>Website: www.sdfamilycare.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8:30AM-5:30PM</i></p>
FQHC	FQHC	FQHC
<p><b>KING CHAVEZ HEALTH CENTER,</b>  <i>Provider ID: 451167</i>  <i>NPI: 1538262092</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <b>IHP OF SOUTHERN CAL-PHP</b>   950 S EUCLID AVE            SAN DIEGO, CA 92114   <i>Phone: (619) 662-4100</i>  <i>Fax: (619) 205-1952</i></p>	<p> <i>After Hours Phone: (619) 280-4213</i>   <i>Website: www.lamaestra.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM</i></p>	<p><b>LINDA VISTA HEALTH CARE CTR,</b>  <i>Provider ID: 206046</i>  <i>NPI: 1609905215</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <b>IHP OF SOUTHERN CAL-PHP</b>   6973 LINDA VISTA RD            SAN DIEGO, CA 92111   <i>Phone: (858) 279-0925</i>  <i>Fax: (858) 633-4680</i></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

 After Hours Phone: (858) 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5:30PM

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### FQHC

**LOGAN HEIGHTS FAMILY HEALTH CENTER,**  
 Provider ID: 624977  
 NPI: 1447281936  
 Provider English Spoken: Y  
 Cultural Competency: N  
 FAMILY HEALTH CENTERS OF SAN DIEGO




 2204 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2355  
 Fax: (619) 232-7011  
 After Hours Phone: (619) 515-2355  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

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### FQHC





**LOGAN HEIGHTS FAMILY**



**HEALTH CENTER,**  
 Provider ID: 206360  
 NPI: 1447281936  
 Provider English Spoken: Y  
 Cultural Competency: N  
 FAMILY HEALTH CENTERS OF SAN DIEGO  
 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 Fax: (619) 234-2447

 After Hours Phone: (619) 515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

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### FQHC

**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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8AM-2PM

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### FQHC

**MID-CITY COMMUNITY CLINIC,**  
 Provider ID: 233532  
 NPI: 1962483040  
 Provider English Spoken: Y  
 Cultural Competency: N  
 IHP OF SOUTHERN CAL-PHP  
 4305 UNIVERSITY AVE STE 150  
 SAN DIEGO, CA 92105  
 Phone: (619) 280-2058  
 Fax: (858) 633-4682  
 After Hours Phone: (619) 280-2058  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\22  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8AM-2PM

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### FQHC

**NESTOR COMMUNITY HEALTH CENTER,**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### 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*

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### 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*

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### 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*

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### 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*

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### FQHC

#### SAN YSIDRO HEALTH 25TH ST FAMILY MEDICINE,

*Provider ID: 517403*

*NPI: 1598308926*

 *Provider English Spoken: Y*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Cultural Competency: N  
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

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](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### FQHC

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **ST VINCENT DE PAUL VILLAGE FAMILY HEALTH CENTER,**


Provider ID: 403583

NPI: 1659415131

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)  
233-8500

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM

### **GASTROENTEROLOGY**

#### **FRENETTE, CATHERINE**

Provider ID: 417937

Provider Gender: Female

License Number: A80461

NPI: 1417935081

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


CHULA VISTA, CALIFORNIA


PACIFIC MED CTR

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545


 Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **GASTROENTEROLOGY**


#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **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

 After Hours Phone: (619)  
515-2545


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **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.operationsa  
mahan.org](http://www.operationsa<br/>mahan.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-4:30PM

### **GENERAL PRACTICE**

#### **DOAN STEPHENS, CRYSTAL**

Provider ID: 233532

Provider Gender: Female

License Number: A152267


NPI: 1730570144


 Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)  
280-2058

 Website: [www.sdfamilycare  
.org](http://www.sdfamilycare<br/>.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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

📞 After Hours Phone: (619) 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: 419529

Provider Gender: Female

License Number: A122238

NPI: 1982044483

📄 Provider English Spoken: Y

📄 Provider Language(s)

Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 2325 COMMERCIAL ST STE  
1400

SAN DIEGO, CA 92113

📞 Phone: (619) 515-2422

📞 After Hours Phone: (619) 515-2422

🌐 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### INTERNAL MEDICINE

#### **ALASSIL, SALLY**

Provider ID: 206360

Provider Gender: Female

License Number: A122238

NPI: 1982044483

📄 Provider English Spoken: Y

📄 Provider Language(s) Spoken: Arabic

Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

📞 Phone: (619) 515-2300

📞 After Hours Phone: (619) 515-2300

🌐 Website: www.fhcsd.org

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider Gender: Female

N

 Accessibility: CONTACT PROVIDER

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### **INTERNAL MEDICINE**

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#### **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-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### **INTERNAL MEDICINE**

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#### **ANDERSON, KENDELL**

Provider ID: 417937

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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

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### **INTERNAL MEDICINE**

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#### **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

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### **INTERNAL MEDICINE**

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#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

PROVIDER	FAMILY HEALTH CENTERS OF SAN DIEGO	N
<b>INTERNAL MEDICINE</b>		
<b>BENITEZ, MARTHA</b>	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
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	<b>INTERNAL MEDICINE</b>	
<b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>		
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	<b>BRIONES COLMAN, FELICIA</b>	<b>CHAN, ANDY</b>
<b>INTERNAL MEDICINE</b>		
<b>BOHR, CHRISTINA</b>	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	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
Provider ID: 417937 Provider Gender: Female License Number: 20A17702 NPI: 1841794344 Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No	<b>INTERNAL MEDICINE</b>	
<b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>		
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	<b>CHANDRADAS, SAJIV</b>	
<b>INTERNAL MEDICINE</b>		
<b>FAMILY HEALTH CENTERS OF SAN DIEGO</b>		

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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-health-  
center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-4PM

### INTERNAL MEDICINE

#### 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**


#### **DAHMS, ERIC**


Provider ID: 417937

Provider Gender: Male

License Number: G80316

NPI: 1306808464

 Provider English Spoken: Y


 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**

#### **DIEP, KEVIN**

Provider ID: 417937

Provider Gender: Male

License Number: 20A17657


NPI: 1083117865

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### **INTERNAL MEDICINE**

#### **DIXIT, SHUBHAM**


Provider ID: 417937

Provider Gender: Male

License Number: 20A21421


NPI: 1932785367

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Hindi


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

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## C. 初级保健目录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TH 8AM-9PM F 8AM-5PM</i></p>	<p><i>Provider Gender: Male</i></p> <p><i>License Number: A154708</i></p> <p><i>NPI: 1972917672</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> <i>Phone: (619) 515-2545</i></p> <p> <i>After Hours Phone: (619) 515-2545</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-TH 8AM-9PM F 8AM-5PM</i></p>	<p> 10737 CAMINO RUIZ STE 115 SAN DIEGO, CA 92126</p> <p> <i>Phone: (858) 695-1262</i></p> <p><i>Fax: (858) 695-2132</i></p> <p> <i>After Hours Phone: (858) 695-1262</i></p> <p> <i>Website: N/A</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 18\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 9AM-3PM</i></p>
<hr/> <p style="text-align: center;"><b>INTERNAL MEDICINE</b></p> <hr/>		
<p><b>DODGE, JOHN</b></p> <p><i>Provider ID: 417937</i></p> <p><i>Provider Gender: Male</i></p> <p><i>License Number: G67831</i></p> <p><i>NPI: 1770510489</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Spanish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> <i>Phone: (619) 515-2545</i></p> <p> <i>After Hours Phone: (619) 515-2545</i></p> <p> <i>Website: www.fhcsd.org</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p>	<p><b>FABELLA, GABRIEL</b></p> <p><i>Provider ID: 9774</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1124060827</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Japanese, Spanish, Tagalog</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>COMMUNITY CARE IPA LLC</i></p>	<p><b>FARASAT, SADAF</b></p> <p><i>Provider ID: 206360</i></p> <p><i>Provider Gender: Female</i></p> <p><i>License Number: A147939</i></p> <p><i>NPI: 1255696407</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Hindi, Punjabi, Urdu</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, NATIVIDAD MEDICAL CENTER, PALOMAR MEDICAL CENTER</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 1809 NATIONAL AVE</p>
<hr/> <p style="text-align: center;"><b>INTERNAL MEDICINE</b></p> <hr/>		
<p><b>DOMINGUEZ, FERNANDO</b></p> <p><i>Provider ID: 417937</i></p>		

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300



 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **INTERNAL MEDICINE**


#### **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](http://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](http://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](http://www.sdfamilycare.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### 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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### INTERNAL MEDICINE

---


#### HENDERSON, PHILIP

Provider ID: 417937


Provider Gender: Male


License Number: A140324

NPI: 1447678834

 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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### 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 417937

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

 Phone: (619) 515-2545

Fax: (619) 501-9645

 After Hours Phone: (619) 515-2545


 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### 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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

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### INTERNAL MEDICINE

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#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: A140646

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM

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### 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

#### 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):

 Accessibility: CONTACT PROVIDER

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### 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- health-  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### INTERNAL MEDICINE

---

#### MARCINIAK, ROMAN

Provider ID: 206360

Provider Gender: Male


License Number: 20A17072


NPI: 1326579210

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### INTERNAL MEDICINE

---

#### NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y


Provider Language(s)


Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### INTERNAL MEDICINE

---

#### NARANJO, RODRIGO

Provider ID: 206046

Provider Gender: Male

License Number: A119010

NPI: 1609095264

Provider English Spoken: Y

Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

 After Hours Phone: (858)  
279-0925

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### 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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

---

### INTERNAL MEDICINE

---

#### NARAYANAN, MEENA

Provider ID: 206363



Provider Gender: Female





License Number: A113448

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录



NPI: 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

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>RESNIKOFF, PAMELA</b> 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	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	<b>HOSPITAL</b> 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
<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>RIVERA, TANIA</b> Provider ID: 206363 Provider Gender: Female License Number: A126958 NPI: 1336346972 Provider English Spoken: Y	<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>ROUEL, WADI</b> 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	<hr/> <b>INTERNAL MEDICINE</b> <hr/> <b>SASSIC, JESSICA</b> 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

American Sign Language (ASL): **SHI, RUJING**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### **INTERNAL MEDICINE**

---


**SHAMSINEJAD BABAKI,  
ARASH**


Provider ID: 631494

Provider Gender: Male

License Number: A81206

NPI: 1750498119

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Farsi


Cultural Competency: N

Hospital Affiliation: ST MARYS  
MEDICAL CENTER SAN  
FRANCISCO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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### **INTERNAL MEDICINE**

---

Provider ID: 417937

Provider Gender: Female

License Number: 20A19399


NPI: 1710446539


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545


 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### **INTERNAL MEDICINE**

---


**SMILDE, RENEE**

Provider ID: 417937

Provider Gender: Female

License Number: A70175

NPI: 1427010594

 Provider English Spoken: Y  
 Provider Language(s)


Spoken: Dutch


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545


 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

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### **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





了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Phone: (619) 515-2300  
 After Hours Phone: (619) 515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**



#### **VALDEZ, KRYSYAL 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](http://www.operationsamahan.org)  
 Medi-Cal Open Panel: Yes


Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-4:30PM

### **INTERNAL MEDICINE**

#### **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](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**


#### **WASTILA, LISA**

Provider ID: 403583  
 Provider Gender: Female

License Number: A60801  
 NPI: 1043375231  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: German  
 Cultural Competency: N  
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1501 IMPERIAL AVE  
 SAN DIEGO, CA 92101  
 Phone: (619) 233-8500  
 After Hours Phone: (619) 233-8500  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **INTERNAL MEDICINE**

#### **WATTANAMANO, PORNTHAP**

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE


#### **WATTANAMANO, PORNTHEP**


Provider ID: 206046

Provider Gender: Male

License Number: C186338

NPI: 1295738516

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Thai

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858)  
279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### INTERNAL MEDICINE


#### **WATTS, ELI**

Provider ID: 451167

Provider Gender: Male

License Number: A79383

NPI: 1649373739

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 950 S EUCLID AVE  
SAN DIEGO, CA 92114  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### 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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*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](http://www.fhcsd.org)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*


### **MULTI SPECIALTY MEDICAL** **CLINIC**

**UCSD MEDICAL GROUP,**  
*Provider ID: 179639*  
*NPI: 1508968751*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*UCSD MEDICAL GROUP*  
 4168 FRONT ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
*Fax: (888) 539-8781*  
 After Hours Phone: (800)  
926-8273  
 Website: N/A  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 25\None*



*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*

### **MULTI SPECIALTY MEDICAL** **CLINIC**

**UCSD MEDICAL GROUP,**  
*Provider ID: 179619*  
*NPI: 1578672184*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*UCSD MEDICAL GROUP*  
 330 LEWIS ST STE 400  
SAN DIEGO, CA 92103  
 Phone: (619) 471-9260  
*Fax: (619) 471-9310*  
 After Hours Phone: (619)  
471-9260  
 Website: N/A



*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\25*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*

### **NEUROLOGY**



**CANTU-REYNA, GUILLERMO**  
*Provider ID: 185268*  
*Provider Gender: Male*  
*License Number: A41375*  
*NPI: 1447389101*  
 *Provider English Spoken: Y*  
 *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](http://www.lamaestra.org)

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*






### **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*

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## C. 初级保健目录




 4094 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 515-2545  
 After Hours Phone: (619)  
 515-2545  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### 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](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TH 8AM-9PM  
 F 8AM-5PM

### 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](http://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](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

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 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-TH 8AM-9PM  
F 8AM-5PM*

### **OBSTETRICS / GYNECOLOGY**


#### **AL-MSHHDANI, AYSER**

*Provider ID: 185268*

*Provider Gender: Female*

*License Number: A172929*

*NPI: 1679008569*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Arabic*

*Cultural Competency: N*


*Hospital Affiliation: PALOMAR  
MEDICAL CENTER, SCRIPPS  
MERCY HOSPITAL CHULA*


*VISTA, Sharp Grossmont*


*Hospital, SCRIPPS MERCY  
HOSPITAL*

*Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC*

 *4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105*

 *Phone: (619) 280-4213*

 *After Hours Phone: (619)  
280-4213*


 *Website: [www.lamaestra.org](http://www.lamaestra.org)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

### **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](http://www.fhcsd.org)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-TH 8:30AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

*Provider ID: 206362*

*Provider Gender: Female*

*License Number: 20A14919*

*NPI: 1619397031*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation:*

*GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL*

*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 *3544 30TH ST  
SAN DIEGO, CA 92104*

 *Phone: (619) 515-2424*

 *After Hours Phone: (619)  
515-2424*


 *Website: [www.fhcsd.org](http://www.fhcsd.org)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-TH  
8:30AM-5:30PM*

*F 8:30AM-5PM*

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

*Provider ID: 206362*

*Provider Gender: Female*

*License Number: 20A14919*

*NPI: 1619397031*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation:*

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## C. 初级保健目录

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3544 30TH ST  
SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

Provider ID: 416831

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3514 30TH ST  
SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619)  
515-2424

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

Provider ID: 206360

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
Phone: (619) 515-2300  
After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **ALIMONOS, LYSISTRATI**

Provider ID: 206363

Provider Gender: Female

License Number: 20A14919

NPI: 1619397031

Provider English Spoken: Y

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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

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## C. 初级保健目录

### **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](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-9PM

W-F 8:30AM-5:30PM

SA 9AM-4PM

### **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](http://www.sdfamilycare.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-9PM

W-F 8:30AM-5:30PM

SA 9AM-4PM

### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 206363

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2420

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 After Hours Phone: (619) 515-2420

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 206360

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619) 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 416831

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 3514 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **BUECHNER, CHARLENE**

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY


BIRCH HOSP FOR WOMEN

AND NEWBORNS


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 3544 30TH ST

SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **BUECHNER, CHARLENE**

Provider ID: 206362

Provider Gender: Female

License Number: A68463

NPI: 1376663831

☐ Provider English Spoken: Y

☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SHARP MARY

BIRCH HOSP FOR WOMEN

AND NEWBORNS

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 3544 30TH ST

SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

📞 After Hours Phone: (619)  
515-2424

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 206362

Provider Gender: Male

License Number: A113001

NPI: 1225231582

☐ Provider English Spoken: Y

☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

📍 3544 30TH ST

SAN DIEGO, CA 92104

☎ Phone: (619) 515-2424

📞 After Hours Phone: (619)  
515-2424

🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-W 8:30AM-5PM  
TH 9:30AM-6PM

### **OBSTETRICS / GYNECOLOGY**

#### **CARTER, KHALIL**

Provider ID: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### 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: 206360

Provider Gender: Male

License Number: A113001

NPI: 1225231582

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,

GROSSMONT HOSPITAL, TRI

CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: www.fhcsd.org

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: 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



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-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: 206360*

*Provider Gender: Female*  
*License Number: A163464*  
*NPI: 1326531401*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp  
Grossmont Hospital*  
*Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO*

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 *Phone: (619) 515-2300*  
 *After Hours Phone: (619)  
515-2300*  
 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*



*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*



### **OBSTETRICS / GYNECOLOGY**


#### **CHAKRABARTI, PRIYA**

*Provider ID: 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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录



 Phone: (619) 515-2444  
 After Hours Phone: (619) 515-2444  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-W  
8:30AM-5:30PM  
TH 9AM-6PM  
F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**


Provider ID: 416831  
Provider Gender: Male  
License Number: A108228  
NPI: 1629277322  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO






 3514 30TH ST  
SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619) 515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **DE MIK, TRAVIS**






Provider ID: 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DE MIK, TRAVIS**

Provider ID: 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **DORUELO, ASHLEY**

Provider ID: 402851

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

### **DORUELO, ASHLEY**

Provider ID: 206363

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560

 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

### **DORUELO, ASHLEY**

Provider ID: 206360

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

### **DORUELO, ASHLEY**

Provider ID: 416831

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp


Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes



Min/Max Age: 0\18

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

PROVIDER  
 Hours: M 8AM-7PM  
 TU-TH 8AM-6PM  
 F 8AM-5:30PM  
 SA 8AM-5PM





 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM


### OBSTETRICS / GYNECOLOGY

#### **FOLCHTORRES-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

### OBSTETRICS / GYNECOLOGY

#### **FOLCHTORRES-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



### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

Provider ID: 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **HANLEY, LAUREN**

Provider ID: 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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 After Hours Phone: (619) 515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-W  
8:30AM-5:30PM  
TH 9AM-6PM  
F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**

Provider ID: 402851

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

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619) 515-2444


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-W 8:30AM-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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH  
8:30AM-5:30PM  
F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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## C. 初级保健目录

### **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: 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: 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: 206360

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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: 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  
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**

#### **LOEFFLER, ALLISON**

Provider ID: 206362  
Provider Gender: Female  
License Number: A116680  
NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

#### **SAN DIEGO**

3544 30TH ST  
SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619)  
515-2424

Website: www.fhcsd.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LOEFFLER, ALLISON**

Provider ID: 416831  
Provider Gender: Female  
License Number: A116680  
NPI: 1700073962

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

3514 30TH ST  
SAN DIEGO, CA 92104  
Phone: (619) 515-2424  
After Hours Phone: (619)  
515-2424

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LOEFFLER, ALLISON**

Provider ID: 206362

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:


GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

### PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LOEFFLER, ALLISON**

Provider ID: 402851

Provider Gender: Female

License Number: A116680

NPI: 1700073962

Provider English Spoken: Y

Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109

 Phone: (619) 515-2444

 After Hours Phone: (619)  
515-2444

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://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: 402851

Provider Gender: Female

License Number: A164859

NPI: 1952751711

Provider English Spoken: Y

Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

*Spoken: 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: 416831*  
*Provider Gender: Female*  
*License Number: A164859*  
*NPI: 1952751711*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Hindi*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL*  
*Board Certified Specialty: No*

#### **FAMILY HEALTH CENTERS OF SAN DIEGO**

 3514 30TH ST  
SAN DIEGO, CA 92104  
 *Phone: (619) 515-2424*  
 *After Hours Phone: (619)  
515-2424*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\18*



*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-TH 8AM-5PM*


### **OBSTETRICS / GYNECOLOGY**


#### **SAPRA, SONIA**


*Provider ID: 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**


#### **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**

#### **STABEN, REBECCA**

*Provider ID: 206360*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female  
License Number: 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**

#### **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: 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: 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  
F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **TRUJILLO, JENNIFER**

Provider ID: 451167  
Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: 20A8204

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA


MED CTR

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 950 S EUCLID AVE

SAN DIEGO, CA 92114

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100


 Website: [www.syhealth.org/clinics/king-chavez-health-center](http://www.syhealth.org/clinics/king-chavez-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **WINESBURG, JENNIFER**

Provider ID: 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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

### FAMILY HEALTH CENTERS OF SAN DIEGO

 3705 MISSION BLVD  
SAN DIEGO, CA 92109  
 Phone: (619) 515-2444  
 After Hours Phone: (619) 515-2444  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**




#### ZIEG, ALAN




Provider ID: 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](http://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: 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### ZIEG, ALAN

Provider ID: 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

American Sign Language (ASL):

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **ZIEG, ALAN**

Provider ID: 206362

Provider Gender: Male

License Number: G78814

NPI: 1699790634

 Provider English Spoken: Y

 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

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](http://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

### **OPHTHALMOLOGY**




#### **NAJAFI, DAVID**




Provider ID: 206360

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Male  
License Number: 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

#### **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

#### **CRAWFORD, KAYVA**

Provider ID: 206360  
Provider Gender: Female  
License Number: A165819  
NPI: 1396241824  
 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






#### **DAVIS, MORGAN**

Provider ID: 206360  
Provider Gender: Female  
License Number: A181809  
NPI: 1891359154

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
**FAMILY HEALTH CENTERS OF  
 SAN DIEGO**

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **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](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes



Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **PEDIATRICS**

#### **ABELL, GEOFFREY**

Provider ID: 27341  
 Provider Gender: Male  
 NPI: 1245256130  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO, PARADISE VALLEY  
 HOSPITAL, SCRIPPS MERCY  
 HOSPITAL CHULA VISTA,  
 SHARP MARY BIRCH HOSP  
 FOR WOMEN AND  
 NEWBORNS, SCRIPPS MERCY  
 HOSPITAL  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK

 292 EUCLID AVE STE 220  
 SAN DIEGO, CA 92114  
 Phone: (619) 262-8624  
 Fax: (619) 262-6639  
 After Hours Phone: (619)  
 262-8624  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **ABRAMSON, RACHEL**

Provider ID: 185268  
 Provider Gender: Female  
 License Number: A104918  
 NPI: 1588707178  
 Provider English Spoken: Y  
 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](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-6PM  
 SA 8AM-2PM

### **PEDIATRICS**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


### 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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


### PEDIATRICS

### ADLOUNI, LOUBABA

Provider ID: 230441

Provider Gender: Female

NPI: 1669443685


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR HEALTH,  
PALOMAR MEDICAL CENTER  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 16918 DOVE CANYON RD  
STE 200  
SAN DIEGO, CA 92127

 Phone: (858) 924-1960

Fax: (858) 924-1964

 After Hours Phone: (858)  
924-1960

 Website: N/A


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS


### 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

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-5PM

### PEDIATRICS

### ANDREE, GREGOR


Provider ID: 233532

Provider Gender: Male

License Number: A72833

NPI: 1467436063

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: German, Spanish  
Cultural Competency: N


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058

 After Hours Phone: (619)  
280-2058

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes


























Min/Max Age: 0\22

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## C. 初级保健目录


<p>N  <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>PEDIATRICS</b></p> <p><b>ANDREE, GREGOR</b> <i>Provider ID: 482070</i> <i>Provider Gender: Male</i> <i>License Number: A72833</i> <i>NPI: 1467436063</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: German, Spanish</i> <i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i></p> <p> 7011 LINDA VISTA RD SAN DIEGO, CA 92111</p> <p> <i>Phone: (858) 810-8700</i>  <i>After Hours Phone: (858) 810-8700</i></p> <p> <i>Website: www.sdfamilycare.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M 8:30AM-5:30PM</i> <i>TU 8:30AM-9PM</i> <i>W-F 8:30AM-5:30PM</i> <i>SA 9AM-4PM</i></p> <hr/> <p><b>PEDIATRICS</b></p> <p><b>ARCHAMBAULT, CHRISTIAN</b> <i>Provider ID: 5589</i> <i>Provider Gender: Male</i></p>	<p><i>NPI: 1992776918</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, 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</i> <i>Board Certified Specialty: No</i> <i>RADY CHILDRENS HEALTH NETWORK</i></p> <p> 16918 DOVE CANYON RD STE 200 SAN DIEGO, CA 92127</p> <p> <i>Phone: (858) 924-1960</i> <i>Fax: (858) 924-1964</i>  <i>After Hours Phone: (858) 924-1960</i></p> <p> <i>Website: N/A</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i></p> <hr/> <p><b>PEDIATRICS</b></p>	<p><b>AWDYKOVYCH, MARTA</b> <i>Provider ID: 206360</i> <i>Provider Gender: Female</i> <i>License Number: A44027</i> <i>NPI: 1447265137</i></p> <p> <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Chinese, French, Spanish, Ukrainian</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: SHARP MEMORIAL HOSPITAL</i> <i>Board Certified Specialty: No</i> <i>FAMILY HEALTH CENTERS OF SAN DIEGO</i></p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> <i>Phone: (619) 515-2300</i>  <i>After Hours Phone: (619) 515-2300</i></p> <p> <i>Website: www.fhcsd.org</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <hr/> <p><b>PEDIATRICS</b></p> <p><b>AYSON, NICOLE</b> <i>Provider ID: 417429</i> <i>Provider Gender: Female</i> <i>License Number: A128091</i> <i>NPI: 1013278704</i></p> <p> <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY</i></p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

**CHILDRENS HOSPITAL SAN DIEGO**  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101  
 Phone: (619) 515-2525  
 After Hours Phone: (619) 515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER



### 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

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

#### **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

### PEDIATRICS

#### **CHEN, JENNIFER**


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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**


#### **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.or

g  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N




 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-6PM  
 SA 8AM-2PM

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







## C. 初级保健目录

Provider Gender: Female  
NPI: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  Provider English Spoken: Y  
Cultural Competency: N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### **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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

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### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-7PM  
TU-TH 8:30AM-6PM  
F 8:30AM-5:30PM  
SA 8:30AM-5PM

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### **PEDIATRICS**

#### **GUPTA, VARSHA**

Provider ID: 206360

Provider Gender: Female

License Number: A164889

NPI: 1891283214

Provider English Spoken: Y

Provider Language(s)  
Spoken: Hindi, Spanish


Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

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### **PEDIATRICS**

#### **HENDERSON, TREVOR**

Provider ID: 58111

Provider Gender: Male

NPI: 1356449425

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
GROSSMONT HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, ALVARADO HOSPITAL  
LLC

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### NETWORK

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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### 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

Provider Language(s)

Spoken: Bengali, Hindi,

Polish, Spanish, Tagalog

Cultural Competency: N

Board Certified Specialty: No  
OPERATION SAMAHAN

10737 CAMINO RUIZ STE  
235

SAN DIEGO, CA 92126

Phone: (844) 200-2426

After Hours Phone: (844)  
200-2426

Website: www.operationsa  
mahan.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM

#### PEDIATRICS

### KESANAPALLI, DEEPTHI

Provider ID: 235069

Provider Gender: Female

NPI: 1487948584

Provider English Spoken: Y

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### 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-0PM

#### 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

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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p style="text-align: center;"><b>PEDIATRICS</b></p> <p><b>LUJAN, ARLEEN</b>            Provider ID: 206360            Provider Gender: Female            License Number: A61687            NPI: 1760412431</p> <p> 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</p> <p> 1809 NATIONAL AVE            SAN DIEGO, CA 92113   Phone: (619) 515-2300   After Hours Phone: (619) 515-2300   Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER</p>	<p style="text-align: center;"><i>Spanish</i></p> <p>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</p> <p> 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</p>	<p> 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</p>
<p style="text-align: center;"><b>PEDIATRICS</b></p> <p><b>MADANY, GEORGE</b>            Provider ID: 318924            Provider Gender: Male            NPI: 1811968837</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Arabic, French,</p>	<p style="text-align: center;"><b>PEDIATRICS</b></p> <p><b>MAHENDRAN, SRIVIDYA</b>            Provider ID: 482070            Provider Gender: Female            License Number: A92173            NPI: 1487843454</p> <p> Provider English Spoken: Y   Provider Language(s) Spoken: Spanish            Cultural Competency: N            Board Certified Specialty: No            IHP OF SOUTHERN CAL-PHP</p>	<p style="text-align: center;"><b>PEDIATRICS</b></p> <p><b>MANRIQUEZ-CASTILLO, ERENDIRA</b>            Provider ID: 185268            Provider Gender: Female            License Number: A75533            NPI: 1356397418</p> <p> 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</p> <p> 4060 FAIRMOUNT AVE            SAN DIEGO, CA 92105   Phone: (619) 255-9155   After Hours Phone: (619) 255-9155   Website: www.lamaestra.org</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


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**


#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

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-5:30PM

### **PEDIATRICS**

#### **RODRIGUEZ, JAVIER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Provider ID: 185268  
 Provider Gender: Male  
 License Number: A82639  
 NPI: 1013059385  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
**LA MAESTRA FAMILY CLINIC**  
 4060 FAIRMOUNT AVE  
 SAN DIEGO, CA 92105  
 Phone: (619) 255-9155  
 After Hours Phone: (619)  
 255-9155  
 Website: [www.lamaestra.org](http://www.lamaestra.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### **PEDIATRICS**

**RODRIGUEZ, ALDO**  
 Provider ID: 451167  
 Provider Gender: Male  
 License Number: A134995  
 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](http://www.syhealth.org/clinics/king-chavez-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8AM-4PM

### **PEDIATRICS**

**RUBENSTEIN, STUART**  
 Provider ID: 521305  
 Provider Gender: Male  
 NPI: 1689633844  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL  
 ENCINITAS, RADY CHILDRENS  
 HOSPITAL SAN DIEGO,  
 SCRIPPS MEMORIAL  
 HOSPITAL, SHARP MEMORIAL  
 HOSPITAL  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 11943 EL CAMINO REAL

STE 210  
 SAN DIEGO, CA 92130  
 Phone: (858) 793-1011  
 After Hours Phone: (858)  
 793-1011  
 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8AM-0PM

### **PEDIATRICS**


**SAMPATH, SRIVIDYA**  
 Provider ID: 416831  
 Provider Gender: Female  
 License Number: A132576  
 NPI: 1275892754  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: French  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO  
 3514 30TH ST  
 SAN DIEGO, CA 92104  
 Phone: (619) 515-2424  
 After Hours Phone: (619)  
 515-2424  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\18


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): Provider ID: 206360

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

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### **PEDIATRICS**

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#### **SEBSO, JODI**

Provider ID: 416831

Provider Gender: Female

License Number: A103099

NPI: 1538484316

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3514 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424

 After Hours Phone: (619)  
515-2424


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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### **PEDIATRICS**


---

#### **SEBSO, JODI**

Provider Gender: Female

License Number: A103099

NPI: 1538484316

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

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### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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### **PEDIATRICS**

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#### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

 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 N  
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):

 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female

License Number: A76785

NPI: 1851323315

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: SCRIPPS


MERCY HOSPITAL,

GROSSMONT HOSPITAL

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)  
515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **PEDIATRICS**


#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 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):

 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):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

### PEDIATRICS

#### 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-5PM

### PEDIATRICS

#### TAMAYO, MAITHE

Provider ID: 356145

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

2391 ISLAND AVE

SAN DIEGO, CA 92102

Phone: (619) 515-2435

After Hours Phone: (619)  
515-2435

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### TAMAYO, MAITHE

Provider ID: 206360

Provider Gender: Female

License Number: A80504

NPI: 1487748430

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF

SAN DIEGO

1809 NATIONAL AVE

SAN DIEGO, CA 92113

Phone: (619) 515-2300

After Hours Phone: (619)  
515-2300

Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### WASSON, MINA

Provider ID: 524333

Provider Gender: Female

NPI: 1366753022

Provider English Spoken: Y

Provider Language(s)

Spoken: Russian

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

11943 EL CAMINO REAL

STE 210

SAN DIEGO, CA 92130

Phone: (858) 793-1011

After Hours Phone: (858)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

793-1011  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 8AM-0PM

### **PEDIATRICS**

#### **WATERS, ELIZABETH**

Provider ID: 153090  
Provider Gender: Female  
NPI: 1730477621  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PARADISE  
VALLEY HOSPITAL, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SCRIPPS MERCY HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

292 EUCLID AVE STE 220  
SAN DIEGO, CA 92114  
Phone: (619) 262-8624  
Fax: (619) 262-6639  
After Hours Phone: (619)

262-8624  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### **PEDIATRICS**

#### **WEATHERLY, JACOB**

Provider ID: 637376  
Provider Gender: Male  
NPI: 1538520457  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: LUCILE  
SALTER PACKARD  
CHILDRENS HOSP, Stanford  
Health Care  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

6699 ALVARADO RD STE  
2200  
SAN DIEGO, CA 92120  
Phone: (619) 265-3400  
Fax: (619) 265-3407  
After Hours Phone: (619)  
265-3400  
Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT

PROVIDER  
Hours: M-F 8AM-5PM  
SA 8:30AM-0PM

### **PEDIATRICS**

#### **WONG, YOLANDA**

Provider ID: 233532  
Provider Gender: Female  
License Number: A94449  
NPI: 1851599872  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105  
Phone: (619) 280-2058  
After Hours Phone: (619)  
280-2058  
Website: www.sdfamilycare  
.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\22  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **WONG, YOLANDA**

Provider ID: 482070

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female  
License Number: 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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M 8:30AM-5:30PM  
TU 8:30AM-9PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

### 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](http://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](http://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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

SAN DIEGO, CA 92113  
☎ Phone: (619) 515-2300  
🕒 After Hours Phone: (619) 515-2300  
🌐 Website: [www.fhcsd.org](http://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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

### **PHYSICIANS ASSISTANT**

**ARMENTA, JORGE**  
Provider ID: 185268  
Provider Gender: Male  
License Number: PA13694  
NPI: 1346382611  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC  
📍 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
☎ Phone: (619) 255-9155  
🕒 After Hours Phone: (619) 255-9155  
🌐 Website: [www.lamaestra.org](http://www.lamaestra.org)  
g

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-6PM  
SA 8AM-2PM

### **PHYSICIANS ASSISTANT**

**BATISTA, OSVALDO**  
Provider ID: 206360  
Provider Gender: Male  
License Number: PA17864  
NPI: 1245349224  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO  
📍 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
☎ Phone: (619) 515-2300  
🕒 After Hours Phone: (619) 515-2300  
🌐 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER



























### **PHYSICIANS ASSISTANT**

**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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

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## C. 初级保健目录








<p>N   <i>Accessibility: CONTACT PROVIDER</i></p>	<p>FAMILY HEALTH CENTERS OF SAN DIEGO   3544 30TH ST            SAN DIEGO, CA 92104   <i>Phone: (619) 515-2424</i>   <i>After Hours Phone: (619) 515-2424</i>   <i>Website: www.fhcsd.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i></p>	<p>PROVIDER  <hr/> <b>PHYSICIANS ASSISTANT</b></p>
<p><b>PHYSICIANS ASSISTANT</b>  <b>BHAGAN, SHANNA</b>  <i>Provider ID: 206362</i>  <i>Provider Gender: Female</i>  <i>License Number: PA59874</i>  <i>NPI: 1437635943</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i>            FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p><i>N</i>   <i>Accessibility: CONTACT PROVIDER</i></p>	<p><b>CHAN, TIFFANY</b>  <i>Provider ID: 206360</i>  <i>Provider Gender: Female</i>  <i>License Number: PA23258</i>  <i>NPI: 1790111607</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i>            FAMILY HEALTH CENTERS OF SAN DIEGO</p>
<p> 3544 30TH ST            SAN DIEGO, CA 92104   <i>Phone: (619) 515-2424</i>   <i>After Hours Phone: (619) 515-2424</i>   <i>Website: www.fhcsd.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i></p>	<p><b>PHYSICIANS ASSISTANT</b>  <b>CASTILLO, PATRICIA</b>  <i>Provider ID: 206362</i>  <i>Provider Gender: Female</i>  <i>License Number: PA17220</i>  <i>NPI: 1376550657</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i>            FAMILY HEALTH CENTERS OF SAN DIEGO</p>	<p> 1809 NATIONAL AVE            SAN DIEGO, CA 92113   <i>Phone: (619) 515-2300</i>   <i>After Hours Phone: (619) 515-2300</i>   <i>Website: www.fhcsd.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT PROVIDER</i></p>
<p><b>PHYSICIANS ASSISTANT</b>  <b>CASTILLO, PATRICIA</b>  <i>Provider ID: 206362</i>  <i>Provider Gender: Female</i>  <i>License Number: PA17220</i>  <i>NPI: 1376550657</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i></p>	<p> 3544 30TH ST            SAN DIEGO, CA 92104   <i>Phone: (619) 515-2424</i>   <i>After Hours Phone: (619) 515-2424</i>   <i>Website: www.fhcsd.org</i>  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\None</i>  <i>American Sign Language (ASL): N</i>   <i>Accessibility: CONTACT</i></p>	<p><b>PHYSICIANS ASSISTANT</b>  <b>CONDEZ, ESEL</b>  <i>Provider ID: 206360</i>  <i>Provider Gender: Male</i>  <i>License Number: PA53129</i>  <i>NPI: 1073978680</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Board Certified Specialty: No</i>            FAMILY HEALTH CENTERS OF SAN DIEGO</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER





### **PHYSICIANS ASSISTANT**

**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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM

### **PHYSICIANS ASSISTANT**

**DRAME, SALWA**  
Provider ID: 417987  
Provider Gender: Female  
License Number: PA59481  
NPI: 1093136426  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4874 POLK AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 515-2426  
 After Hours Phone: (619)  
515-2426  
 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-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, KRISTA**

*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, KRISTA**

*Provider ID: 206363*

*Provider Gender: Female*


*License Number: PA58505*


*NPI: 1104203454*


 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish*  
*Cultural Competency: N*

*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*

 *4725 MARKET ST  
SAN DIEGO, CA 92102*

 *Phone: (619) 515-2560*

 *After Hours Phone: (619)  
515-2560*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

---

### **PHYSICIANS ASSISTANT**


#### **LANDIS, SARAH**

*Provider ID: 417782*

*Provider Gender: Female*


*License Number: PA58826*


*NPI: 1144733676*


 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL*

*Board Certified Specialty: No*  
*FAMILY HEALTH CENTERS OF SAN DIEGO*

 *1250 6TH AVE STE 100  
SAN DIEGO, CA 92101*


 *Phone: (619) 515-2430*

 *After Hours Phone: (619)  
515-2430*

 *Website: www.fhcsd.org*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

### **PHYSICIANS ASSISTANT**

#### **LAPINA, LORI**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 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](http://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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH  
8:30AM-5:30PM  
F 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH  
8:30AM-5:30PM  
F 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### **PHYSICIANS ASSISTANT**

#### **LOHNES, ELLIE**

Provider ID: 417429

Provider Gender: Female

License Number: PA63071

NPI: 1902580426


Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

### SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101

 Phone: (619) 515-2525

 After Hours Phone: (619)  
515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

#### PHYSICIANS ASSISTANT

##### LOPEZ, MARIO

Provider ID: 417937

Provider Gender: Male


License Number: PA21385


NPI: 1932335080

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE  
SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

#### PHYSICIANS ASSISTANT

##### LOPEZ, MARIO

Provider ID: 417987

Provider Gender: Male


License Number: PA21385


NPI: 1932335080


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4874 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 515-2426

 After Hours Phone: (619)  
515-2426

 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

#### PHYSICIANS ASSISTANT


##### MARTINEZ-MURGUIA, IRENE

Provider ID: 185268

Provider Gender: Female

License Number: PA20296

NPI: 1447492889

 Provider English Spoken: Y


 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
LA MAESTRA FAMILY CLINIC

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105

 Phone: (619) 255-9155

 After Hours Phone: (619)  
255-9155

 Website: [www.lamaestra.org](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

#### 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](http://www.lamaestra.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None


American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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*

 *1809 NATIONAL AVE  
SAN DIEGO, CA 92113*

 *Phone: (619) 515-2300*

 *After Hours Phone: (619)  
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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: 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](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM

TU 8AM-8PM

W-F 8AM-5PM

SA 9AM-1PM

### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **QUICK, ELISABETH**

Provider ID: 206360

Provider Gender: Female

License Number: PA21591

NPI: 1790055010

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Board Certified Specialty: No


FAMILY HEALTH CENTERS OF

SAN DIEGO

 1809 NATIONAL AVE

SAN DIEGO, CA 92113

 Phone: (619) 515-2300

 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


### SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101  
 Phone: (619) 515-2525  
 After Hours Phone: (619)  
515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### PHYSICIANS ASSISTANT

#### 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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### PHYSICIANS ASSISTANT

#### SHARPE, NORMA

Provider ID: 517403

Provider Gender: Female



License Number: PA20490


NPI: 1619100237

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 316 25TH ST  
SAN DIEGO, CA 92102

 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: N/A  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

#### TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: MT2061555



NPI: 1215264452


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No

### FAMILY HEALTH CENTERS OF SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560  
 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

#### TOMASZEWSKI, DEBRA

Provider ID: 206363

Provider Gender: Female

License Number: PA58081



NPI: 1215264452


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF

SAN DIEGO

 4725 MARKET ST  
SAN DIEGO, CA 92102

 Phone: (619) 515-2560  
 After Hours Phone: (619)  
515-2560

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

PROVIDER	Spoken: Spanish Cultural Competency: N	American Sign Language (ASL): N	
<b>PHYSICIANS ASSISTANT</b>			
<b>TREUNER, JULIE</b>			
Provider ID: 206360	Board Certified Specialty: No	Accessibility: CONTACT PROVIDER	
Provider Gender: Female	FAMILY HEALTH CENTERS OF	Hours: M-TU	
License Number: PA17478	SAN DIEGO	8:30AM-5:30PM	
NPI: 1922013614	1809 NATIONAL AVE	W 10AM-7PM	
Provider English Spoken: Y	SAN DIEGO, CA 92113	TH-F 8:30AM-5:30PM	
Provider Language(s) Spoken: Spanish	Phone: (619) 515-2300		
Cultural Competency: N	After Hours Phone: (619) 515-2300		
Board Certified Specialty: No	Website: www.fhcsd.org		
FAMILY HEALTH CENTERS OF	Medi-Cal Open Panel: Yes		
SAN DIEGO	Min/Max Age: 0\None		
1809 NATIONAL AVE	American Sign Language (ASL):		
SAN DIEGO, CA 92113	N		
Phone: (619) 515-2300	Accessibility: CONTACT		
After Hours Phone: (619) 515-2300	PROVIDER		
Website: www.fhcsd.org	<b>PHYSICIANS ASSISTANT</b>		
Medi-Cal Open Panel: Yes	<b>UDOH, EKAETE</b>		
Min/Max Age: 0\None	Provider ID: 418535	Board Certified Specialty: No	
American Sign Language (ASL):	Provider Gender: Male	FAMILY HEALTH CENTERS OF	
N	License Number: PA19664	SAN DIEGO	
Accessibility: CONTACT	NPI: 1841472776	1809 NATIONAL AVE	
PROVIDER	Provider English Spoken: Y	SAN DIEGO, CA 92113	
Hours: M-F 9AM-5PM	Cultural Competency: N	Phone: (619) 515-2300	
	Board Certified Specialty: No	After Hours Phone: (619) 515-2300	
	OPERATION SAMAHAN	Website: www.fhcsd.org	
	9995 CARMEL MOUNTAIN	Medi-Cal Open Panel: Yes	
	RD STE B10 AND B11	Min/Max Age: 0\None	
	SAN DIEGO, CA 92129	American Sign Language (ASL):	
	Phone: (844) 200-2426	N	
	After Hours Phone: (844) 200-2426	Accessibility: CONTACT	
	Website: www.operationsa	PROVIDER	
	mahan.org	Hours: M-F 9AM-5PM	
	Medi-Cal Open Panel: Yes		
	Min/Max Age: 0\None	<b>PHYSICIANS ASSISTANT</b>	
		<b>YOUNG-PEN, TONI</b>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 233597  
Provider Gender: Female  
License Number: PA18746  
NPI: 1932297595

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish,  
Vietnamese

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE  
SAN DIEGO, CA 92105

 Phone: (619) 563-0250  
 After Hours Phone: (619)  
563-0250

 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM

### **PHYSICIANS ASSISTANT**


#### **YOUNG-PEN, TONI**



Provider ID: 206362  
Provider Gender: Female  
License Number: PA18746  
NPI: 1932297595


Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish,  
Vietnamese


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **YOUNG-PEN, TONI**

Provider ID: 206362  
Provider Gender: Female  
License Number: PA18746  
NPI: 1932297595

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish,  
Vietnamese

Cultural Competency: N


Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 3544 30TH ST  
SAN DIEGO, CA 92104

 Phone: (619) 515-2424  
 After Hours Phone: (619)  
515-2424

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


### **PODIATRIST**



#### **JUAREZ, LETICIA**


Provider ID: 206360  
Provider Gender: Female  
License Number: DPM5661  
NPI: 1508393778

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 1809 NATIONAL AVE  
SAN DIEGO, CA 92113

 Phone: (619) 515-2300  
 After Hours Phone: (619)  
515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER


### **PODIATRIST**




#### **LE, DIANA**


Provider ID: 206360  
Provider Gender: Female  
License Number: DPM5734  
NPI: 1184112864

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Hospital Affiliation: ANAHEIM  
 REGIONAL MEDICAL CTR  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER


### **PODIATRIST**

#### **LE, DIANA**

Provider ID: 206363  
 Provider Gender: Female  
 License Number: DPM5734  
 NPI: 1184112864

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Vietnamese  
 Cultural Competency: N  
 Hospital Affiliation: ANAHEIM  
 REGIONAL MEDICAL CTR  
 Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 4725 MARKET ST  
 SAN DIEGO, CA 92102  
 Phone: (619) 515-2560  
 After Hours Phone: (619)  
 515-2560



 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER




### **PODIATRIST**


#### **MANCHEL, BRUCE**

Provider ID: 631494  
 Provider Gender: Male  
 License Number: DPM2930  
 NPI: 1790890788

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N

Hospital Affiliation: SHARP  
 CORONADO HOSP AND  
 HEALTHCARE CTR  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
 SAN DIEGO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100

 Website: [www.syhealth.org](http://www.syhealth.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N

 Accessibility: CONTACT  
 PROVIDER




### **PODIATRIST**


#### **SCHNEIDER, SARAH**

Provider ID: 206360  
 Provider Gender: Female  
 License Number: DPM4819  
 NPI: 1326282237

 Provider English Spoken: Y  
 Cultural Competency: N

Board Certified Specialty: No  
 FAMILY HEALTH CENTERS OF  
 SAN DIEGO

 1809 NATIONAL AVE  
 SAN DIEGO, CA 92113  
 Phone: (619) 515-2300  
 After Hours Phone: (619)  
 515-2300

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

### **PODIATRIST**

#### **SCHNEIDER, SARAH**

Provider ID: 402851  
 Provider Gender: Female  
 License Number: DPM4819  
 NPI: 1326282237




 Provider English Spoken: Y  
 Cultural Competency: N


Board Certified Specialty: No


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### FAMILY HEALTH CENTERS OF SAN DIEGO


 3705 MISSION BLVD  
SAN DIEGO, CA 92109  
 Phone: (619) 515-2444  
 After Hours Phone: (619) 515-2444




 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N


 Accessibility: CONTACT PROVIDER

#### **PODIATRIST**

### SCHNEIDER, SARAH


Provider ID: 417429  
Provider Gender: Female  
License Number: DPM4819  
NPI: 1326282237  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF SAN DIEGO

 1550 BROADWAY STE 2  
SAN DIEGO, CA 92101  
 Phone: (619) 515-2525  
 After Hours Phone: (619) 515-2525

 Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT



### PROVIDER

 Hours: M-F  
8:30AM-5:30PM

#### **PREVENTATIVE MEDICINE**

##### **GENERAL**


### HILL, LINDA

Provider ID: 206046  
Provider Gender: Female  
License Number: G41532  
NPI: 1467434811  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858) 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM

#### **PREVENTATIVE MEDICINE**

##### **GENERAL**

### HILL, LINDA

Provider ID: 206046  
Provider Gender: Female  
License Number: G41532  
NPI: 1467434811


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858) 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 9AM-4PM

#### **PREVENTATIVE MEDICINE**

##### **GENERAL**

### HILL, LINDA

Provider ID: 482070  
Provider Gender: Female  
License Number: G41532  
NPI: 1467434811



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: French, 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.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M 8:30AM-5:30PM  
 TU 8:30AM-9PM  
 W-F 8:30AM-5:30PM  
 SA 9AM-4PM



### PREVENTATIVE MEDICINE GENERAL

#### **RISSER, JOSEPH**

Provider ID: 482070  
 Provider Gender: Male  
 License Number: G70886  
 NPI: 1952386765

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP


 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858)  
 810-8700  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):


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](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes


Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F  
 8:30AM-5:30PM  
 SA 9AM-4PM






### PREVENTATIVE MEDICINE

#### GENERAL

#### **RISSER, JOSEPH**

Provider ID: 206046  
 Provider Gender: Male  
 License Number: G70886  
 NPI: 1952386765

 Provider English Spoken: Y  
 Cultural Competency: N  
 Board Certified Specialty: Yes  
 IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 Fax: (858) 279-0377  
 After Hours Phone: (858)  
 279-0925  
 Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F  
 8:30AM-5:30PM  
 SA 9AM-4PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### PREVENTATIVE MEDICINE

#### GENERAL

#### **ROMERO, CAMILA**

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 279-0377

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PREVENTATIVE MEDICINE

#### GENERAL

#### **ROMERO, CAMILA**

Provider ID: 206046

Provider Gender: Female

License Number: A93812

NPI: 1508912130

Provider English Spoken: Y

Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 279-0377

After Hours Phone: (858)  
279-0925

Website: [www.sdfamilycare.org](http://www.sdfamilycare.org)

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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

### REGISTERED PHYSICAL

#### THERAPIST

#### **CHAVARRIA, JESSICA**

Provider ID: 417937

Provider Gender: Female

License Number: PT292351

NPI: 1407391808

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

4094 4TH AVE  
SAN DIEGO, CA 92103

Phone: (619) 515-2545

After Hours Phone: (619)  
515-2545

Website: [www.fhcsd.org](http://www.fhcsd.org)





























Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<p>N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-TH 8AM-9PM F 8AM-5PM</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>CONCORS, ANDREW</b></p> <p>Provider ID: 417937</p> <p>Provider Gender: Male</p> <p>License Number: PT12930</p> <p>NPI: 1578706743</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> Phone: (619) 515-2545</p> <p> After Hours Phone: (619) 515-2545</p> <p> Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <p> Hours: M-TH 8AM-9PM F 8AM-5PM</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>CUMMINGS, GEORGE</b></p>	<p>Provider ID: 417937</p> <p>Provider Gender: Male</p> <p>License Number: PT295173</p> <p>NPI: 1497236384</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Spanish</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> Phone: (619) 515-2545</p> <p> After Hours Phone: (619) 515-2545</p> <p> Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>DAHMS, MADELYNN</b></p> <p>Provider ID: 206360</p> <p>Provider Gender: Female</p> <p>License Number: PT295463</p> <p>NPI: 1245712702</p> <p> Provider English Spoken: Y</p> <p> Provider Language(s) Spoken: Sign Language</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>FAMILY HEALTH CENTERS OF</p>	<p>SAN DIEGO</p> <p> 1809 NATIONAL AVE SAN DIEGO, CA 92113</p> <p> Phone: (619) 515-2300</p> <p> After Hours Phone: (619) 515-2300</p> <p> Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT PROVIDER</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>FIELDING, JOSEPH</b></p> <p>Provider ID: 417937</p> <p>Provider Gender: Male</p> <p>License Number: PT40975</p> <p>NPI: 1235577560</p> <p> Provider English Spoken: Y</p> <p>Cultural Competency: N</p> <p>Board Certified Specialty: No</p> <p>FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p> 4094 4TH AVE SAN DIEGO, CA 92103</p> <p> Phone: (619) 515-2545</p> <p> After Hours Phone: (619) 515-2545</p> <p> Website: <a href="http://www.fhcsd.org">www.fhcsd.org</a></p> <p>Medi-Cal Open Panel: Yes</p> <p>Min/Max Age: 0\None</p> <p>American Sign Language (ASL): N</p> <p> Accessibility: CONTACT</p>
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## C. 初级保健目录

PROVIDER	Cultural Competency: N	American Sign Language (ASL): N
<hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>HAPKE, ELENA</b>            Provider ID: 417937            Provider Gender: Female            License Number: PT292613            NPI: 1003354895</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No            FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p><input type="checkbox"/> 4094 4TH AVE            SAN DIEGO, CA 92103  <input type="phone"/> Phone: (619) 515-2545  <input type="clock"/> After Hours Phone: (619) 515-2545  <input type="globe"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>HERMES, MARY</b>            Provider ID: 206360            Provider Gender: Female            License Number: PT24707            NPI: 1518028547</p> <p><input type="checkbox"/> Provider English Spoken: Y  <input type="checkbox"/> Provider Language(s) Spoken: Spanish</p>	<p>Board Certified Specialty: No            FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p><input type="checkbox"/> 1809 NATIONAL AVE            SAN DIEGO, CA 92113  <input type="phone"/> Phone: (619) 515-2300  <input type="clock"/> After Hours Phone: (619) 515-2300  <input type="globe"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>IRIZARRY, NICOLE</b>            Provider ID: 206360            Provider Gender: Female            License Number: PT33914            NPI: 1003088063</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No            FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p><input type="checkbox"/> 1809 NATIONAL AVE            SAN DIEGO, CA 92113  <input type="phone"/> Phone: (619) 515-2300  <input type="clock"/> After Hours Phone: (619) 515-2300  <input type="globe"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None</p>	<p>Accessability: CONTACT PROVIDER</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>MAHONEY, KAITLYN</b>            Provider ID: 417937            Provider Gender: Female            License Number: PT296559            NPI: 1114583176</p> <p><input type="checkbox"/> Provider English Spoken: Y            Cultural Competency: N            Board Certified Specialty: No            FAMILY HEALTH CENTERS OF SAN DIEGO</p> <p><input type="checkbox"/> 4094 4TH AVE            SAN DIEGO, CA 92103  <input type="phone"/> Phone: (619) 515-2545  <input type="clock"/> After Hours Phone: (619) 515-2545  <input type="globe"/> Website: www.fhcsd.org            Medi-Cal Open Panel: Yes            Min/Max Age: 0\None            American Sign Language (ASL): N  <input type="wheelchair"/> Accessibility: CONTACT PROVIDER  <input type="clock"/> Hours: M-F 8:30AM-5:30PM</p> <hr/> <p><b>REGISTERED PHYSICAL THERAPIST</b></p> <hr/> <p><b>MIGNEA, DAVID</b>            Provider ID: 417937            Provider Gender: Male</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

License Number: PT293536


NPI: 1043736879


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545


 After Hours Phone: (619)  
515-2545


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### REGISTERED PHYSICAL THERAPIST

#### **SCHMIDT, BRYAN**


Provider ID: 417937

Provider Gender: Male

License Number: PT28061


NPI: 1780685032

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### REGISTERED PHYSICAL THERAPIST


#### **VAN DYKE, JASON**

Provider ID: 417937

Provider Gender: Male

License Number: PT25155


NPI: 1487658720

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4094 4TH AVE

SAN DIEGO, CA 92103

 Phone: (619) 515-2545

 After Hours Phone: (619)  
515-2545

 Website: www.fhcsd.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: M-TH 8AM-9PM  
F 8AM-5PM

### RHEUMATOLOGY

#### **OGANDO, SHEENA**

Provider ID: 206363

Provider Gender: Female

License Number: A142743

NPI: 1649564295

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: JOHN

MUIR MEDICAL CENTER


WALNUT CREEK CAMPUS


Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 4725 MARKET ST

SAN DIEGO, CA 92102

 Phone: (619) 515-2560


 After Hours Phone: (619)  
515-2560


 Website: www.fhcsd.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

### RHEUMATOLOGY

#### **REDDY, DANA**

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider 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

### **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

### **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

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 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## C. 初级保健目录

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](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

#### CERTIFIED NURSE PRACTITIONER

#### **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](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

#### CERTIFIED NURSE PRACTITIONER

#### **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](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

#### CERTIFIED NURSE PRACTITIONER

#### **FREEMAN, WANDA**

Provider ID: 206426

Provider Gender: Female

License Number: NP95003903

NPI: 1659504264


Provider English Spoken: Y


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None





















American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

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## C. 初级保健目录

<i>PROVIDER</i>		<b><u>CERTIFIED NURSE PRACTITIONER</u></b>
<b>FREEMAN, WANDA</b> Provider ID: 206426 Provider Gender: Female License Number: NP95003903 NPI: 1659504264 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767  After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	<b><u>CERTIFIED NURSE PRACTITIONER</u></b> <b>HENLEY, MEARA</b> Provider ID: 206426 Provider Gender: Female License Number: NP95002545 NPI: 1538319645 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP
 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767  After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	<b><u>CERTIFIED NURSE PRACTITIONER</u></b> <b>HENLEY, MEARA</b> Provider ID: 206426 Provider Gender: Female License Number: NP95002545 NPI: 1538319645 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767  After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
<b><u>CERTIFIED NURSE PRACTITIONER</u></b> <b>FREEMAN, WANDA</b> Provider ID: 206426 Provider Gender: Female License Number: NP95003903 NPI: 1659504264 <input type="checkbox"/> Provider English Spoken: Y Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP	 150 VALPRED A RD SAN MARCOS, CA 92069  Phone: (760) 736-6767  After Hours Phone: (760) 736-6767  Website: www.ihpsocal.org Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	<b><u>CERTIFIED NURSE PRACTITIONER</u></b> <b>HENLEY, MEARA</b> Provider ID: 206426 Provider Gender: Female License Number: NP95002545 NPI: 1538319645 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **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  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)

736-6767  
Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **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  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

### **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  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

After Hours Phone: (760)  
736-6767

Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **CERTIFIED NURSE PRACTITIONER**

**MACIAS, ALISSA**

Provider ID: 206426

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录


License Number: NP21368


NPI: 1952658445

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **MACIAS, ALISSA**

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445

 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **MACIAS, ALISSA**

Provider ID: 206426

Provider Gender: Female


License Number: NP21368


NPI: 1952658445


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **BELANGER, TANYA**

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

#### **BELANGER, TANYA**

Provider ID: 206426

Provider Gender: Female

License Number: NM235844


NPI: 1407287469

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
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## C. 初级保健目录

📞 After Hours Phone: (760) 736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **CERTIFIED REGISTERED NURSE MIDWIFE**

#### **BELANGER, TANYA**

Provider ID: 206426

Provider Gender: Female

License Number: NM235844

NPI: 1407287469

📄 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPREDA RD  
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🕒 After Hours Phone: (760)  
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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 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

📞 Phone: (760) 736-6767

Fax: (760) 736-6744

🕒 After Hours Phone: (760)  
736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **NATH, DEVARSHI**

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

📄 Provider English Spoken: Y

📄 Provider Language(s)

Spoken: Bengali  
Cultural Competency: N

Board Certified Specialty: No  
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🕒 After Hours Phone: (760)  
736-6767

🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

#### **NATH, DEVARSHI**

Provider ID: 614511

Provider Gender: Male

License Number: C54157

NPI: 1275630618

📄 Provider English Spoken: Y

📄 Provider Language(s)  
Spoken: Bengali

Cultural Competency: N

Board Certified Specialty: No  
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🌐 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

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## C. 初级保健目录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### FQHC

#### TRUECARE,


Provider ID: 206426

NPI: 1598484255


 Provider English Spoken: Y  
Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD  
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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

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### FQHC

#### TRUECARE,

Provider ID: 206426


NPI: 1245246917

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 150 VALPRED RD

SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)  
736-6767


 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### FQHC

#### TRUECARE,


Provider ID: 206426

NPI: 1811617939

 Provider English Spoken: Y  
Cultural Competency: N


IHP OF SOUTHERN CAL-PHP

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 Phone: (760) 736-6767

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736-6767


 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### FQHC

#### TRUECARE,


Provider ID: 614511

NPI: 1598484255

 Provider English Spoken: Y  
Cultural Competency: N

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736-6767


 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### FQHC

#### TRUECARE,


Provider ID: 614511

NPI: 1811617939

 Provider English Spoken: Y  
Cultural Competency: N

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Fax: (760) 736-6744

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Medi-Cal Open Panel: Yes

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

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

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](http://www.ihpsocal.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

---

### GENERAL PRACTICE

---

#### WITCZAK, IZABELA


Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Polish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### GENERAL PRACTICE

---


#### WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Polish


Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPREDA RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### GENERAL PRACTICE

---

#### WITCZAK, IZABELA

Provider ID: 206426

Provider Gender: Female

License Number: A71311

NPI: 1184735201

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Polish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

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## C. 初级保健目录

PROVIDER	Board Certified Specialty: No	Accessibility: CONTACT PROVIDER
<b>INTERNAL MEDICINE</b>		
<b>PONIACHIK, SAMUEL</b>	<b>IHP OF SOUTHERN CAL-PHP</b>	
Provider ID: 206426	150 VALPREDA RD SAN MARCOS, CA 92069	
Provider Gender: Male	Phone: (760) 736-6767	
License Number: G74757	After Hours Phone: (760) 736-6767	
NPI: 1467485078	Website: www.ihpsocal.org	
<input type="checkbox"/> Provider English Spoken: Y	Medi-Cal Open Panel: Yes	
<input type="checkbox"/> Provider Language(s) Spoken: Spanish	Min/Max Age: 0\None	
Cultural Competency: N	American Sign Language (ASL): N	
Board Certified Specialty: No	Accessibility: CONTACT PROVIDER	
<b>IHP OF SOUTHERN CAL-PHP</b>		
150 VALPREDA RD SAN MARCOS, CA 92069		
Phone: (760) 736-6767		
After Hours Phone: (760) 736-6767		
Website: www.ihpsocal.org		
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
Accessibility: CONTACT PROVIDER		
<b>INTERNAL MEDICINE</b>		
<b>PONIACHIK, SAMUEL</b>	<b>IHP OF SOUTHERN CAL-PHP</b>	
Provider ID: 206426	150 VALPREDA RD SAN MARCOS, CA 92069	
Provider Gender: Male	Phone: (760) 736-6767	
License Number: G74757	After Hours Phone: (760) 736-6767	
NPI: 1467485078	Website: www.ihpsocal.org	
<input type="checkbox"/> Provider English Spoken: Y	Medi-Cal Open Panel: Yes	
<input type="checkbox"/> Provider Language(s) Spoken: Spanish	Min/Max Age: 0\None	
Cultural Competency: N	American Sign Language (ASL): N	
Board Certified Specialty: No	Accessibility: CONTACT PROVIDER	
<b>IHP OF SOUTHERN CAL-PHP</b>		
150 VALPREDA RD SAN MARCOS, CA 92069		
Phone: (760) 736-6767		
After Hours Phone: (760) 736-6767		
Website: www.ihpsocal.org		
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
Accessibility: CONTACT PROVIDER		
<b>OBSTETRICS / GYNECOLOGY</b>		
<b>MOSTOFIAN, EIMANEH</b>	<b>IHP OF SOUTHERN CAL-PHP</b>	
Provider ID: 206426	150 VALPREDA RD SAN MARCOS, CA 92069	
Provider Gender: Female	Phone: (760) 736-6767	
License Number: A97181	After Hours Phone: (760) 736-6767	
NPI: 1154477628	Website: www.ihpsocal.org	
<input type="checkbox"/> Provider English Spoken: Y	Medi-Cal Open Panel: Yes	
<input type="checkbox"/> Provider Language(s) Spoken: Farsi, Spanish	Min/Max Age: 0\None	
Cultural Competency: N	American Sign Language (ASL): N	
Hospital Affiliation: PALOMAR MEDICAL CENTER	Accessibility: CONTACT PROVIDER	
Board Certified Specialty: No	Hours: M-F 8AM-5PM SA 8AM-5PM	
<b>IHP OF SOUTHERN CAL-PHP</b>		
150 VALPREDA RD SAN MARCOS, CA 92069		
Phone: (760) 736-6767		
After Hours Phone: (760) 736-6767		
Website: www.ihpsocal.org		
Medi-Cal Open Panel: Yes		
Min/Max Age: 0\None		
American Sign Language (ASL): N		
Accessibility: CONTACT PROVIDER		
<b>OBSTETRICS / GYNECOLOGY</b>		
<b>MOSTOFIAN, EIMANEH</b>	<b>IHP OF SOUTHERN CAL-PHP</b>	
Provider ID: 206426	150 VALPREDA RD SAN MARCOS, CA 92069	
Provider Gender: Female	Phone: (760) 736-6767	
License Number: A97181	After Hours Phone: (760) 736-6767	
NPI: 1154477628	Website: www.ihpsocal.org	
<input type="checkbox"/> Provider English Spoken: Y	Medi-Cal Open Panel: Yes	
<input type="checkbox"/> Provider Language(s) Spoken: Farsi, Spanish	Min/Max Age: 0\None	
Cultural Competency: N	American Sign Language (ASL): N	
Hospital Affiliation: PALOMAR MEDICAL CENTER	Accessibility: CONTACT PROVIDER	
Board Certified Specialty: No	Hours: M-F 8AM-5PM SA 8AM-5PM	
<b>IHP OF SOUTHERN CAL-PHP</b>		
150 VALPREDA RD SAN MARCOS, CA 92069		
Phone: (760) 736-6767		
After Hours Phone: (760) 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. 初级保健目录

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 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

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736-6767


 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 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

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 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **POUNTNEY, MARLENE**


Provider ID: 206426

Provider Gender: Female

License Number: A93248

NPI: 1174703680

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: TRI CITY  
MEDICAL CTR, PALOMAR  
MEDICAL CENTER


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

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SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
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 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **POUNTNEY, MARLENE**

Provider ID: 206426

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider 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: 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**

#### **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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Provider ID: 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 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 566-1501

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM

### PEDIATRICS

#### **MATIAS, JULIE**

Provider ID: 661065

Provider Gender: Female

NPI: 1083094510

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

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

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 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6797

After Hours Phone: (760)  
736-6767

Website: N/A

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

American Sign Language (ASL): Provider ID: 206426

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](http://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 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](http://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](http://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: 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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 VALPRED A 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**

#### **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 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **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 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER




### **PEDIATRICS**


#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### PEDIATRICS

#### **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](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

#### **BERNARDO, RACHELLE**

Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)


Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### PHYSICIANS ASSISTANT

#### **BERNARDO, RACHELLE**


Provider ID: 614511

Provider Gender: Female

License Number: PA17718

NPI: 1821237678

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER





Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 106  
SAN MARCOS, CA 92078

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## C. 初级保健目录


 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

---

### PHYSICIANS ASSISTANT

---

#### CHISWICK, GARY

Provider ID: 206426  
Provider Gender: Male  
License Number: PA22667  
NPI: 1174964001  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER






---

### 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](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

---

### PHYSICIANS ASSISTANT

---

#### CHISWICK, GARY

Provider ID: 206426  
Provider Gender: Male  
License Number: PA22667  
NPI: 1174964001  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: [www.ihpsocal.org](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER




---

### 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](http://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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider ID: 206426  
Provider Gender: 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**

**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  
IHP OF SOUTHERN CAL-PHP  
 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 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  
 150 VALPREDA RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
 After Hours Phone: (760) 736-6767  
 Website: www.ihpsocal.org  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


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## C. 初级保健目录

American Sign Language (ASL): NPI: 1518133032

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **SPENCE, JAMIE**

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org

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


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **SPENCE, JAMIE**

Provider ID: 206426

Provider Gender: Female

License Number: PA21723

NPI: 1518133032


Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **TAHRIRI, BAHAREH**

Provider ID: 206426

Provider Gender: Female

License Number: PA51867

NPI: 1295147387


Provider English Spoken: Y


Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

 After Hours Phone: (760)  
736-6767

 Website: www.ihpsocal.org


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-5PM

### **PHYSICIANS ASSISTANT**

#### **TAHRIRI, BAHAREH**

Provider ID: 206426

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Provider Gender: Female

License Number: 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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## C. 初级保健目录

American Sign Language (ASL):  Hours: M-F 8AM-5PM

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](http://www.ihpsocal.org)  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **SAN YSIDRO**

#### **CARDIOVASCULAR DISEASE**

#### **PONCE, SONIA**

Provider ID: 206292

Provider Gender: Female

License Number: A145008

NPI: 1164659033

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL


CHULA VISTA, SCRIPPS


MERCY HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

#### **CERTIFIED NURSE PRACTITIONER**

#### **CELIZ, ADRIANA**

Provider ID: 227469

Provider Gender: Female

License Number: NP95004315

NPI: 1972956514

Provider English Spoken: Y


Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: <https://www.syhealth.org/locations>

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

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## C. 初级保健目录


 3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### CERTIFIED NURSE PRACTITIONER


**GARCIA, TEDAYSHIA**

Provider ID: 206292

Provider Gender: Female

License Number: NP95003355

NPI: 1659730778


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): License Number: NP95003024  
NPI: 1215304860

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER


**GUADARRAMA, IGNACIO**

Provider ID: 227469

Provider Gender: Male

License Number: NP95003671

NPI: 1821331174


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

**HACINAS, REYNALDO**


Provider ID: 206292


Provider Gender: Male


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

#### **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  
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**

### KANTAS, PARIS

Provider ID: 206292  
Provider Gender: Male  
License Number: NP18661  
NPI: 1114329612

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP CORONADO HOSP AND HEALTHCARE CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

#### **CERTIFIED NURSE PRACTITIONER**

### ORDINANZA, MYLENE

Provider ID: 227469  
Provider Gender: Female  
License Number: NP95019995  
NPI: 1265019061

Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: <https://www.syhealth.org/locations>  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

#### **CERTIFIED NURSE PRACTITIONER**

### PITTMAN, LILIANA

Provider ID: 227469  
Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


License Number: NP95017732


NPI: 1326599002


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### 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>

[alth.org/locations](https://www.syhealth.org/locations)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CERTIFIED NURSE PRACTITIONER



#### **VAZQUEZ-ERLBECK, MARTHA**

Provider ID: 227469

Provider Gender: Female

License Number: NP95001960


NPI: 1669865960


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

#### **OCHOA, RAUL**

Provider ID: 206292

Provider Gender: Male

License Number: DC33693


NPI: 1518401827


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### ENDOCRINOLOGY

#### METABOLISM DIABETES

#### **CRUZ, MICHAEL**

Provider ID: 206292

Provider Gender: Male

License Number: A138772

NPI: 1265851133

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

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## C. 初级保健目录

MEMORIAL HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

#### ALGHAMDI, ASMA

Provider ID: 227469  
Provider Gender: Female  
License Number: A167529  
NPI: 1316310840  
Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: <https://www.syhealth.org/locations>  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

#### ALVAREZ-ESTRADA, MIGUEL

Provider ID: 206292  
Provider Gender: Male  
License Number: A157505  
NPI: 1588197826  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL, PARADISE VALLEY  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER

### FAMILY PRACTICE

ALVAREZ-ESTRADA, MIGUEL  
Provider ID: 227411  
Provider Gender: Male  
License Number: A157505  
NPI: 1588197826

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MERCY  
HOSPITAL, PARADISE VALLEY  
HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: [syhealth.org/clinic/s/maternal-child-health-center](http://syhealth.org/clinic/s/maternal-child-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5PM

### FAMILY PRACTICE


#### ARRIETA, NOEMI

Provider ID: 206292  
Provider Gender: Female  
License Number: 20A11153

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

NPI: 1912223496


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**


#### **BAUM, PETER**

Provider ID: 227411

Provider Gender: Male

License Number: 20A14949

NPI: 1174919971

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

### **FAMILY PRACTICE**


#### **BORSAN, COSMIN**

Provider ID: 206292

Provider Gender: Male

License Number: 20A17643

NPI: 1679060255


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Romanian


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**

#### **CAMPOS, MELISSA**

Provider ID: 227411

Provider Gender: Female

License Number: A138474

NPI: 1427475318

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes





















Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>CARRIEDO-CENICEROS, MARIA</b> Provider ID: 206292 Provider Gender: Female License Number: A78373 NPI: 1295746618 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  4004 BEYER BLVD SAN YSIDRO, CA 92173  Phone: (619) 662-4100 Fax: (619) 205-6341  After Hours Phone: (619) 662-4100  Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER	<i>Cultural Competency: N</i> <i>Board Certified Specialty: No</i> <i>IHP OF SOUTHERN CAL-PHP</i>  4004 BEYER BLVD SAN YSIDRO, CA 92173  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5:30PM SA 8:30AM-2PM	 Phone: (619) 662-4100 Fax: (619) 205-6341  After Hours Phone: (619) 662-4100  Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER
<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>CASTILLO, STEPHANIE</b> Provider ID: 206292 Provider Gender: Female License Number: A159673 NPI: 1902330723 <input type="checkbox"/> Provider English Spoken: Y	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>CEVALLOS, JAMES</b> Provider ID: 206292 Provider Gender: Male License Number: A55469 NPI: 1720181829 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> 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	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>CORONADO, MYRNA</b> Provider ID: 206292 Provider Gender: Female License Number: A112627 NPI: 1710147566 <input type="checkbox"/> Provider English Spoken: Y <input type="checkbox"/> Provider Language(s) Spoken: Spanish Cultural Competency: N Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP  4004 BEYER BLVD SAN YSIDRO, CA 92173  Phone: (619) 662-4100  After Hours Phone: (619) 662-4100  Website: <a href="http://www.syhealth.org/clinics/san-ysidro-health-center">www.syhealth.org/clinics/san-ysidro-health-center</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### **FAMILY PRACTICE**

---


#### **CORONADO, MYRNA**

*Provider ID: 227411*

*Provider Gender: Female*

*License Number: A112627*

*NPI: 1710147566*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Board Certified Specialty: No*


*IHP OF SOUTHERN CAL-PHP*

 4050 BEYER BLVD

SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

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### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

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### **FAMILY PRACTICE**

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#### **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](http://www.syhealth.org)*


*/clinics/san-ysidro-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5:30PM SA 8:30AM-2PM*

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### **FAMILY PRACTICE**

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#### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)*

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## C. 初级保健目录

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**


#### **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](http://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](http://www.syhealth.org/clinics/san-ysidro-health-center)

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## C. 初级保健目录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**


#### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

### **FAMILY PRACTICE**


#### **LEE, JOSEPH**

Provider ID: 206292

Provider Gender: Male

License Number: A164201

NPI: 1417480948

 Provider English Spoken: Y


Cultural Competency: N

Hospital Affiliation: ST

ELIZABETH HOSP


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**

#### **LEE, JOSEPH**

Provider ID: 227469

Provider Gender: Male

License Number: A164201

NPI: 1417480948

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ST




ELIZABETH HOSP

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## C. 初级保健目录


 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

### **FAMILY PRACTICE**


#### **LEPEZ, DAVID**

Provider ID: 206292

Provider Gender: Male

License Number: A130348

NPI: 1205196029

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): SA 8:30AM-2PM  
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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM

### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **FAMILY PRACTICE**

#### **NAVARRO, VANESSAMARIA**

Provider ID: 227469


Provider Gender: Female

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## C. 初级保健目录

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


MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

- 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](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM SA 8:30AM-2PM

### **FAMILY PRACTICE**

#### **ORTEGA, LUIS**

Provider ID: 206292

Provider Gender: Male

License Number: A180886

NPI: 1558924936

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

- center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None



American Sign Language (ASL):

N

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*  
 *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](http://www.syhealth.org/clinics/san-ysidro-health-center)*  
*/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](http://www.syhealth.org/clinics/san-ysidro-health-center)*  
*/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](http://www.syhealth.org/clinics/san-ysidro-health-center)*  
*/clinics/san-ysidro-health*  
*- center*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

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## C. 初级保健目录

American Sign Language (ASL): License Number: A132982

N

 Accessibility: CONTACT PROVIDER

NPI: 1801230297


 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### FAMILY PRACTICE

#### ROSENBAUM, HERBERT

Provider ID: 206292

Provider Gender: Male

License Number: A169694

NPI: 1922532712

 Provider English Spoken: Y


 Provider Language(s) Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### FAMILY PRACTICE

#### SALEM, RAMSEY

Provider ID: 206292


Provider Gender: Male


License Number: A158364


NPI: 1245401298


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619) 662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

### 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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### FAMILY PRACTICE


#### ROJAS, STEVEN

Provider ID: 206292

Provider Gender: Male

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## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### **FAMILY PRACTICE**

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#### **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*

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### **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*

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### **FAMILY PRACTICE**

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#### **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*

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### **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*

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## C. 初级保健目录


**HOSPITAL, PIONEERS  
MEMORIAL HOSPITAL**  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **FAMILY PRACTICE**

**TALAVERA, GREGORY**

Provider ID: 206292  
Provider Gender: Male  
License Number: A40061  
NPI: 1740337161  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TU  
8:30AM-5:30PM

### **FAMILY PRACTICE**

**TAN, LO FU**

Provider ID: 227469  
Provider Gender: Male  
License Number: C170935  
NPI: 1356314835  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: <https://www.syhealth.org/locations>



Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

**TREJO, RAUL**


Provider ID: 206292  
Provider Gender: Male  
License Number: A77936  
NPI: 1174534184

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None



American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### **FAMILY PRACTICE**

**UTZ, JACK**

Provider ID: 206292  
Provider Gender: Male  
License Number: A183145  
NPI: 1194353094

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

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## C. 初级保健目录

*Cultural Competency: N*  
*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**

 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619) 662-4100*  
 *Website: www.syhealth.org /clinics/san-ysidro-health-center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

### **FAMILY PRACTICE**


#### **VANHOLLEBEKE, RACHEL**

*Provider ID: 206292*

*Provider Gender: Female*

*License Number: A177337*

*NPI: 1497217756*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS*

**MEMORIAL HOSPITAL**

*Board Certified Specialty: No*  
**IHP OF SOUTHERN CAL-PHP**

 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: www.syhealth.org*


*/clinics/san-ysidro-health-center*

*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*

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## C. 初级保健目录

### IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### FQHC

### SAN YSIDRO HLTH SAN DIEGO PACE SENIOR HLTH SVS,

Provider ID: 227469

NPI: 1801438239

Provider English Spoken: Y  
Cultural Competency: N

### IHP OF SOUTHERN CAL-PHP

3364 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 600-4870

After Hours Phone: (619)  
662-4100

Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

### GENERAL PRACTICE

### REYNAGA, JOSUE

Provider ID: 206292

Provider Gender: Male

License Number: A181644

NPI: 1356929111

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### GENERAL PRACTICE

### TEJEDA, FRANCISCO

Provider ID: 206292

Provider Gender: Male

License Number: A66885

NPI: 1407940075

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619)  
662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### 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

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## C. 初级保健目录

*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](http://www.syhealth.org/clinics/san-ysidro-health-center)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM*

### **INTERNAL MEDICINE**


#### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

### **INTERNAL MEDICINE**

#### **CARPENTERIII, ROBERT**

*Provider ID: 206292*

*Provider Gender: Male*

*License Number: 20A10964*


*NPI: 1356343040*


 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

*Medi-Cal Open Panel: Yes*


*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

---

### INTERNAL MEDICINE

---


#### CHEN, TSUH-YIN


Provider ID: 206292

Provider Gender: Female

License Number: C55563

NPI: 1093803520

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Portuguese,  
Spanish


Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### INTERNAL MEDICINE

---


#### CHOW, MAN HUNG

Provider ID: 227469

Provider Gender: Female

License Number: G66745

NPI: 1225149115

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N

Hospital Affiliation: PARADISE

VALLEY HOSPITAL, SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS


MEMORIAL HOSPITAL,


SCRIPPS MERCY HOSPITAL


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### INTERNAL MEDICINE

---

#### DELAROSA, 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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

---

### INTERNAL MEDICINE

---

#### DILLON, BENEDICT

Provider ID: 227411

Provider Gender: Male

License Number: A111118

NPI: 1710142708

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

CHULA VISTA, 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/clinic/s/maternal-child-health-center](http://syhealth.org/clinic/s/maternal-child-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

**HURST, MICHAEL**

Provider ID: 206292  
Provider Gender: Male  
License Number: 20A8081  
NPI: 1205893104

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SUTTER  
TRACY COMMUNITY HOSP,  
SCRIPPS MEMORIAL  
HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100  
Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### INTERNAL MEDICINE

**KAUFER, DAVID**

Provider ID: 227469

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

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## C. 初级保健目录

NPI: 1124176102


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100


 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE


#### **MAY, LOUIS**

Provider ID: 206292

Provider Gender: Male

License Number: A138568

NPI: 1720497514

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE


#### **PARK, DANIEL**

Provider ID: 206292

Provider Gender: Male

License Number: A99433

NPI: 1538371844

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


MEMORIAL HOSPITAL


Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### INTERNAL MEDICINE

#### **POAST, JENNIFER**

Provider ID: 206292

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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### INTERNAL MEDICINE

#### **RAMIREZSANCHEZ, CLAUDIA**

Provider ID: 206292

Provider Gender: Female

License Number: A160493

NPI: 1659720555



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## C. 初级保健目录

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MEMORIAL HOSPITAL,  
 SCRIPPS MERCY HOSPITAL  
 CHULA VISTA  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### INTERNAL MEDICINE




#### REDDY, SAMATHHA





Provider ID: 227469  
 Provider Gender: Female  
 License Number: A120797  
 NPI: 1659620854  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Gujarati, Hindi,  
 Punjabi, Spanish, Telugu  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,  
 ALVARADO HOSPITAL LLC,  
 GROSSMONT HOSPITAL,  
 SHARP CHULA VISTA MED  
 CTR, ST AGNES MEDICAL  
 CENTER  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 3364 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: <https://www.syhealth.org/locations>  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### INTERNAL MEDICINE

#### SALERNO, MARIANA

Provider ID: 206292  
 Provider Gender: Female  
 License Number: A131021  
 NPI: 1598921645  
 Provider English Spoken: Y  
 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](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### INTERNAL MEDICINE

#### SCHNEIDER-MUNOZ, MARGARITA

Provider ID: 206292  
 Provider Gender: Female  
 License Number: G81461  
 NPI: 1821299520  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

N

 *Accessibility: CONTACT PROVIDER*

---

### INTERNAL MEDICINE

---


#### **SHEIKH MOHAMED, AMIRA**


*Provider ID: 227469*

*Provider Gender: Female*

*License Number: A153975*

*NPI: 1831583079*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Arabic, French, Hindi, Italian, Urdu*


*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *3364 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*


 *Website: <https://www.syhealth.org/locations>*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

---

### INTERNAL MEDICINE

---


#### **SY, RAMON**


*Provider ID: 227469*

*Provider Gender: Male*

*License Number: A51843*

*NPI: 1982617403*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish, Tagalog*

*Cultural Competency: N*

*Hospital Affiliation: SHARP*

*CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL*


*CHULA VISTA, SCRIPPS*


*MEMORIAL HOSPITAL,*

*PARADISE VALLEY HOSPITAL*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *3364 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: <https://www.syhealth.org/locations>*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

---

### INTERNAL MEDICINE

---

#### **VELAZQUEZ CAMARENA, MARIA**

*Provider ID: 206292*

*Provider Gender: Female*

*License Number: A56153*

*NPI: 1518965714*

 *Provider English Spoken: Y*


 *Provider Language(s) Spoken: Spanish*


*Cultural Competency: N*


*Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*

 *4004 BEYER BLVD SAN YSIDRO, CA 92173*

 *Phone: (619) 662-4100*

 *After Hours Phone: (619) 662-4100*

 *Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

---

### INTERNAL MEDICINE

---

#### **WEN, AKI YEN CHANG**

*Provider ID: 227411*

*Provider Gender: Male*

*License Number: 20A12555*

*NPI: 1205126505*

 *Provider English Spoken: Y*  
*Cultural Competency: N*




*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*



 *4050 BEYER BLVD SAN YSIDRO, CA 92173*

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## C. 初级保健目录



 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

### **INTERNAL MEDICINE GERIATRIC MEDICINE**

#### **PANDIT, IVY**


Provider ID: 206292  
 Provider Gender: Female  
 License Number: C53735  
 NPI: 1891796165  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: KAISER FOUNDATION HOSPITAL RIVERSIDE, RIVERSIDE COUNTY REGIONAL MED CTR  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
 SAN YSIDRO, CA 92173  
 Phone: (619) 205-1950  
 After Hours Phone: (619) 205-1950  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5:30PM  
 SA 8:30AM-2PM

### **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](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

### **OBSTETRICS / GYNECOLOGY**


#### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**


#### **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](http://syhealth.org/clinics/maternal-child-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### **OBSTETRICS / GYNECOLOGY**


#### **CARSON, LATISA**

Provider ID: 206292

Provider Gender: Female

License Number: A72235

NPI: 1245229129

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Hospital Affiliation: SHARP


CHULA VISTA MED CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DANESHMAND, SHAHRAM**

Provider ID: 227411

Provider Gender: Male

License Number: A63844

NPI: 1891867412

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, GROSSMONT

HOSPITAL, SHARP MEMORIAL

HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, SCRIPPS GREEN  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
☎ Phone: (619) 662-4100  
☎ Fax: (619) 205-1948  
📞 After Hours Phone: (619)  
662-4100  
🌐 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **DANESHMAND, SHAHRAM**

Provider ID: 206292  
Provider Gender: Male  
License Number: A63844  
NPI: 1891867412  
☑ Provider English Spoken: Y  
☑ Provider Language(s)

Spoken: Farsi, Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS  
MEMORIAL HOSPITAL, TRI  
CITY MEDICAL CTR, SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, SCRIPPS GREEN  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL, SCRIPPS MERCY  
HOSPITAL CHULA VISTA  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
☎ Phone: (619) 662-4100  
📞 After Hours Phone: (619)  
662-4100  
🌐 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5:30PM

SA 8:30AM-2PM

### **OBSTETRICS / GYNECOLOGY**

#### **DINH, MY**

Provider ID: 206292  
Provider Gender: Female  
License Number: 20A9907  
NPI: 1316146996  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
☎ Phone: (619) 662-4100  
📞 After Hours Phone: (619)  
662-4100  
🌐 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DINH, MY**

Provider ID: 227411  
Provider Gender: Female  
License Number: 20A9907  
NPI: 1316146996  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录



 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **GOLDSTEIN, EDWARD**

Provider ID: 227411  
Provider Gender: Male  
License Number: G20087  
NPI: 1982617494  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP






 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100


Fax: (619) 205-1948  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 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](http://syhealth.org/clinics/maternal-child-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT







PROVIDER  
 Hours: M-F 8:30AM-5PM

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **OBSTETRICS / GYNECOLOGY**

#### **JENKINS, ENCHANTA**

Provider ID: 227411  
Provider Gender: Female  
License Number: C143625  
NPI: 1285604702

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## C. 初级保健目录

Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS 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](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **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

4050 BEYER BLVD SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **SEFA-BOAKYE, KOFI**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: G59670  
 NPI: 1902993660  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: SHARP

CHULA VISTA MED CTR, SHARP CORONADO HOSP AND HEALTHCARE CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA

Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **SHORT, ABIADÉ**

Provider ID: 206292  
 Provider Gender: Male  
 License Number: A114893  
 NPI: 1750559589  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: PARADISE VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS

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## C. 初级保健目录

### MERCY HOSPITAL

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
Phone: (619) 662-4100  
After Hours Phone: (619) 662-4100  
Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### OPHTHALMOLOGY

#### 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](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### PEDIATRICS

#### 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](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### PEDIATRICS

#### BARBADILLO, FERDINAND

Provider ID: 206292

Provider Gender: Male



License Number: A49307

NPI: 1982662193

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## C. 初级保健目录




 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](http://www.syhealth.org/clinics/san-ysidro-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None

American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-TU  
 8:30AM-5:30PM

### 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/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### PEDIATRICS



#### 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/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### PEDIATRICS

#### 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  
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 662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER

### PEDIATRICS

#### GHAHREMANI, SIMIN

Provider ID: 206292  
 Provider Gender: Female

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 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: 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](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **PEDIATRICS**

#### **HERMAN, ANDREA**

Provider ID: 227411

Provider Gender: Female

License Number: A72721

NPI: 1518970037

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR, SCRIPPS


MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD


SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-1948

 After Hours Phone: (619)

662-4100

 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

#### **NISSAN, BETI**

Provider ID: 206292

Provider Gender: Female

License Number: A64487

NPI: 1396705299

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Persian

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, HOLLYWOOD

PRESBYTERIAN MED CTR,


SHARP MEMORIAL HOSPITAL

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP


 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5:30PM

SA 8:30AM-2PM

### **PEDIATRICS**

#### **PIANSAY, MARIACORAZON**

Provider ID: 206292

Provider Gender: Female

License Number: A93785

NPI: 1669680351

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish, Tagalog

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

SCRIPPS MERCY HOSPITAL

CHULA VISTA


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)





Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**


#### **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/clinic](http://syhealth.org/clinic)

s/maternal- child- health-  
center





Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER


### **PEDIATRICS**

#### **RUELAS, ROBERTO**

Provider ID: 227411  
Provider Gender: Male  
License Number: A170141  
NPI: 1194257386  
 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**

#### **SAHMS, TIMOTHY**

Provider ID: 227411

Provider Gender: Male  
License Number: G51462  
NPI: 1780697276

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 205-1948  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **PEDIATRICS**







#### **SAHMS, TIMOTHY**

Provider ID: 206292  
Provider Gender: Male  
License Number: G51462  
NPI: 1780697276

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish



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## C. 初级保健目录







*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619) 662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-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/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER

### **PEDIATRICS**

**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/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8:30AM-5PM

### **PEDIATRICS**

**TAYLOR, TASHA**  
*Provider ID: 227411*  
*Provider Gender: Female*  
*License Number: A82187*  
*NPI: 1528144433*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: TRI CITY MEDICAL CTR*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
*Fax: (619) 205-1948*  
 After Hours Phone: (619) 662-4100  
 Website: [syhealth.org/clinics/maternal-child-health-center](http://syhealth.org/clinics/maternal-child-health-center)  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**


**BUCKNER, JOSEPH**  
*Provider ID: 206292*  
*Provider Gender: Male*  
*License Number: PA18363*  
*NPI: 1215909205*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*

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## C. 初级保健目录



Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)


Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER


### **PHYSICIANS ASSISTANT**

#### **GI, HUNG**

Provider ID: 206292  
Provider Gender: Male  
License Number: PA16994  
NPI: 1023207404  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, French,  
Spanish  
Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP







 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

#### **HARMIS, NATASHA**



Provider ID: 227469  
Provider Gender: Female  
License Number: PA58672  
NPI: 1013516996  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: <https://www.syhealth.org/locations>  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM






### **PHYSICIANS ASSISTANT**

#### **KAMOTO, LYNN**

Provider ID: 206292  
Provider Gender: Female  
License Number: PA17162

NPI: 1447326459  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### **PHYSICIANS ASSISTANT**

**PORTOMADURSKI, KRISTINE**  
Provider ID: 227411  
Provider Gender: Female  
License Number: PA16269  
NPI: 1053403782  
 Provider English Spoken: Y  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4050 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [syhealth.org/clinic](http://syhealth.org/clinic)

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## C. 初级保健目录

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**

#### **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](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **SHARPE, NORMA**

Provider ID: 206292


Provider Gender: Female


License Number: PA20490


NPI: 1619100237


Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **SMITH, DOUGLAS**

Provider ID: 206292


Provider Gender: Male


License Number: PA12304


NPI: 1902016611

Provider English Spoken: Y  
Cultural Competency: N


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)

662-4100

 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **SUNA-SITTO, MOHEEN**

Provider ID: 227469

Provider Gender: Female


License Number: PA22855


NPI: 1497196729

Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3364 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: <https://www.syhealth.org/locations>

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **TRUJILLO, MIGUEL**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## C. 初级保健目录

Provider ID: 206292  
Provider Gender: Male  
License Number: PA15656  
NPI: 1285806794

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **PODIATRIST**

#### **MANCHEL, BRUCE**

Provider ID: 206292  
Provider Gender: Male  
License Number: DPM2930  
NPI: 1790890788

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CORONADO HOSP AND

HEALTHCARE CTR  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 205-6341  
 After Hours Phone: (619)  
662-4100  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)



Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER




### **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

### **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  
 Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

### **SPEECH PATHOLOGIST**

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## C. 初级保健目录

### HILL, CARLA

Provider ID: 206292

Provider Gender: Female

License Number: SP9075

NPI: 1043950751

Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

### SURGERY GENERAL

### OKWUOSA, CHRIS

Provider ID: 206292

Provider Gender: Male

License Number: A170738

NPI: 1114336260

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: Providence

St Mary Medical Center

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

After Hours Phone: (619) 662-4100

Website: [www.syhealth.org/clinics/san-ysidro-health-center](http://www.syhealth.org/clinics/san-ysidro-health-center)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5:30PM  
SA 8:30AM-2PM

### **SANTEE**

### PEDIATRICS

### ARLATA, TAMANTHA

Provider ID: 615945

Provider Gender: Female

NPI: 1568721934

Provider English Spoken: Y

Provider Language(s) Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

9600 CUYAMACA ST STE 101

SANTEE, CA 92071

Phone: (619) 749-2150

Fax: (619) 456-9744

After Hours Phone: (619) 749-2150

Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

### PEDIATRICS

### MANGINE, REGINA

Provider ID: 366456

Provider Gender: Female

NPI: 1417177577

Provider English Spoken: Y

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

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## C. 初级保健目录

 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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 *Accessibility: CONTACT PROVIDER*

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### **FAMILY PRACTICE**

---


#### **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*

---

### **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*

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## C. 初级保健目录

### 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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### OBSTETRICS / GYNECOLOGY


#### **CARTER, KHALIL**

Provider ID: 206361

Provider Gender: Male

License Number: A113001

NPI: 1225231582

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL,


GROSSMONT HOSPITAL, TRI


CITY MEDICAL CTR

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 8788 JAMACHA RD  
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)  
515-2555

 Website: [www.fhcsd.org](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-7PM

W-F 8:30AM-5:30PM

### OBSTETRICS / GYNECOLOGY

#### **CHAKRABARTI, PRIYA**

Provider ID: 206361

Provider Gender: Female

License Number: A163464

NPI: 1326531401

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

 8788 JAMACHA RD  
SPRING VALLEY, CA 91977

 Phone: (619) 515-2555

 After Hours Phone: (619)  
515-2555


 Website: [www.fhcsd.org](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

### OBSTETRICS / GYNECOLOGY

#### **DE MIK, TRAVIS**

Provider ID: 206361

Provider Gender: Male

License Number: A108228

NPI: 1629277322

 Provider English Spoken: Y

Cultural Competency: N

Board Certified Specialty: No

FAMILY HEALTH CENTERS OF  
SAN DIEGO

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## C. 初级保健目录

8788 JAMACHA RD  
SPRING VALLEY, CA 91977  
Phone: (619) 515-2555  
After Hours Phone: (619)  
515-2555

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **DORUELO, ASHLEY**

Provider ID: 206361

Provider Gender: Female

License Number: A178499

NPI: 1033613732

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, Sharp

Grossmont Hospital

Board Certified Specialty: No  
FAMILY HEALTH CENTERS OF  
SAN DIEGO

8788 JAMACHA RD  
SPRING VALLEY, CA 91977  
Phone: (619) 515-2555  
After Hours Phone: (619)  
515-2555

Website: [www.fhcsd.org](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **FOLCHTORRES-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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER  
Hours: M-F  
8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://www.fhcsd.org)  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **OBSTETRICS / GYNECOLOGY**

#### **LIPSCHITZ, LISA**


Provider ID: 206361

Provider Gender: Female

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

License Number: 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


 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)  
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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

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](http://www.fhcsd.org)


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M 8:30AM-5:30PM

TU 8:30AM-7PM

W-F 8:30AM-5:30PM

### **OBSTETRICS / GYNECOLOGY**

#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 9AM-5PM

### **PEDIATRICS**

#### **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](http://www.fhcsd.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

### **PHYSICIANS ASSISTANT**

#### **LOPEZ, MARIO**

Provider ID: 206361

Provider Gender: Male


License Number: PA21385

NPI: 1932335080


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





## C. 初级保健目录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Board Certified Specialty: No*  
**FAMILY HEALTH CENTERS OF SAN DIEGO**

 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**

*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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 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

### FQHC

#### **NEIGHBORHOOD HEALTHCARE,**


Provider ID: 519918

NPI: 1437335148

 Provider English Spoken: Y  
Cultural Competency: N

IHP OF SOUTHERN CAL-PHP

 28477 LIZARD ROCKS RD  
VALLEY CENTER, CA 92082

 Phone: (760) 742-9919

Fax: (360) 462-2750

 After Hours Phone: (760)  
742-9919


 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### PEDIATRICS

#### **CRAYCHEE, LEO**

Provider ID: 71887

Provider Gender: Male

NPI: 1265432710

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 28714 VALLEY CENTER RD  
STE L

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

VALLEY CENTER, CA 92082  Hours: M-F 8AM-5PM

 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): Provider Gender: Female

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

### **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

#### CERTIFIED NURSE PRACTITIONER

#### **WILLIAMS, JINA**

Provider ID: 400339

Provider Gender: Female

License Number: NP95020624

NPI: 1225500259

 Provider English Spoken: Y

Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CHIROPRACTOR

#### JU, NATHANIEL

Provider ID: 400339

Provider Gender: Male

License Number: DC32054

NPI: 1972883882

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

### FAMILY PRACTICE

#### ESPINOSA-SILVA, YAMINAH

Provider ID: 400339

Provider Gender: Female

License Number: 20A12958

NPI: 1003172016

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: [www.vistacommunityclinic.org](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FAMILY PRACTICE

#### KETCHEL, CLINT

Provider ID: 400339

Provider Gender: Male

License Number: A135564

NPI: 1699038125

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, 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](http://www.vistacommunityclinic.org)

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N





















Accessibility: CONTACT  
PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM

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## C. 初级保健目录

W-F 8AM-5PM	 After Hours Phone: (760) 631-5000  Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a> Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M 8AM-5PM TU 10:30AM-7:30PM W-F 8AM-5PM	 Website: N/A Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM
<b>FQHC</b>	<b>PEDIATRICS</b>	
<b>VCC DURIAN,</b>	<b>ASSELIN, LYNETTE</b>	
Provider ID: 411518	Provider ID: 65507	
NPI: 1851300123	Provider Gender: Female	
 Provider English Spoken: Y	NPI: 1053484568	
Cultural Competency: N	 Provider English Spoken: Y	
IHP OF SOUTHERN CAL-PHP	 Provider Language(s) Spoken: Spanish	
 105 DURIAN ST STE A	Cultural Competency: N	
VISTA, CA 92083	Hospital Affiliation: TRI CITY	
 Phone: (844) 308-5003	MEDICAL CTR	
Fax: (760) 414-3892	Board Certified Specialty: No	
 After Hours Phone: (844) 308-5003	RADY CHILDRENS HEALTH NETWORK	
 Website: <a href="http://www.vistacommunityclinic.org">www.vistacommunityclinic.org</a>	 2067 W VISTA WAY STE 280	
Medi-Cal Open Panel: Yes	VISTA, CA 92083	
Min/Max Age: 0\None	 Phone: (760) 941-3630	
American Sign Language (ASL): N	Fax: (760) 941-1214	
 Accessibility: CONTACT PROVIDER	 After Hours Phone: (760) 941-3630	
 Hours: M-F 8:30AM-5PM	 Website: N/A	
<b>FQHC</b>	<b>PEDIATRICS</b>	
<b>VISTA COMMUNITY CLINIC</b>	<b>AMBO, STANLEY</b>	
<b>GRAPEVINE,</b>	Provider ID: 52269	
Provider ID: 400339	Provider Gender: Male	
NPI: 1851300123	NPI: 1891735676	
 Provider English Spoken: Y	 Provider English Spoken: Y	
Cultural Competency: N	 Provider Language(s) Spoken: Spanish	
IHP OF SOUTHERN CAL-PHP	Cultural Competency: N	
 134 GRAPEVINE RD	Hospital Affiliation: TRI CITY	
VISTA, CA 92083	MEDICAL CTR, SCRIPPS	
 Phone: (760) 631-5000	MEMORIAL HOSPITAL	
Fax: (760) 414-3892	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	
	 Accessibility: CONTACT PROVIDER	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

 Hours: M-F 8:30AM-6PM  
SA 9AM-1PM

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### PEDIATRICS


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#### BEDROSIAN, DIANE

Provider ID: 80272

Provider Gender: Female

NPI: 1447323951


 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 2067 W VISTA WAY STE  
280  
VISTA, CA 92083

 Phone: (760) 941-3630  
Fax: (760) 941-1214


 After Hours Phone: (760)  
941-3630

 Website: N/A

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-6PM  
SA 9AM-1PM

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### PEDIATRICS

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#### 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

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### PEDIATRICS

---

#### HARTFORD, NICOLE

Provider ID: 411518

Provider Gender: Female


License Number: 20A14390


NPI: 1346530466


 Provider English Spoken: Y  
Cultural Competency: N

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 105 DURIAN ST STE A  
VISTA, CA 92083

 Phone: (844) 308-5003

 After Hours Phone: (844)  
308-5003

 Website: www.vistacommu  
nityclinic.org

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

---

### PEDIATRICS

---

#### KARP, MICHAEL

Provider ID: 95672


Provider Gender: Male


NPI: 1295808632

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-6PM  
SA 9AM-1PM


### PEDIATRICS

#### **KRAK, MICHAEL**

Provider ID: 23455

Provider Gender: Male

NPI: 1003989419

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL  
ENCINITAS, TRI CITY MEDICAL  
CTR

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 2067 W VISTA WAY STE  
280  
VISTA, CA 92083

 Phone: (760) 941-3630

Fax: (760) 941-1214

 After Hours Phone: (760)  
941-3630

 Website: N/A

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

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-0PM

### PEDIATRICS


#### **PERTL, URSULA**

Provider ID: 593894

Provider Gender: Female

NPI: 1609947464

 Provider English Spoken: Y

 Provider Language(s)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## C. 初级保健目录

Spoken: German, Spanish  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY  
 MEDICAL CTR, SCRIPPS  
 MEMORIAL HOSPITAL  
 ENCINITAS, RADY CHILDRENS  
 HOSPITAL SAN DIEGO,  
 CHILDRENS HOSP OF LOS  
 ANGELES  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK

 2067 W VISTA WAY STE 180  
 VISTA, CA 92083

 Phone: (760) 945-3434  
 Fax: (760) 945-6761

 After Hours Phone: (760)  
 945-3434

 Website: N/A  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N



 Accessibility: CONTACT  
 PROVIDER

 Hours: SU 10AM-2PM  
 M-F 8AM-5PM  
 SA 8AM-0PM


### **PEDIATRICS**



#### **RONAN, KEVIN**


Provider ID: 400339  
 Provider Gender: Male  
 License Number: G77176  
 NPI: 1225017353


 Provider English Spoken: Y  
 Provider Language(s)


Spoken: Spanish, Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY  
 MEDICAL CTR, SCRIPPS  
 MEMORIAL HOSPITAL  
 ENCINITAS  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
 VISTA, CA 92083

 Phone: (760) 631-5000  
 After Hours Phone: (760)  
 631-5000

 Website: www.vistacommunityclinic.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N



 Accessibility: CONTACT  
 PROVIDER


 Hours: M 8AM-5PM  
 TU 10:30AM-7:30PM  
 W-F 8AM-5PM



### **PHYSICIANS ASSISTANT**


#### **WEAVER, APRIL**


Provider ID: 400339  
 Provider Gender: Female  
 License Number: PA20775  
 NPI: 1063552800


 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
 VISTA, CA 92083

 Phone: (760) 631-5000  
 After Hours Phone: (760)  
 631-5000

 Website: www.vistacommunityclinic.org  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N

 Accessibility: CONTACT  
 PROVIDER

 Hours: M-TH 9AM-2PM  
 F 8AM-5PM  
 SA 8AM-4PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

### ALPINE

#### OPTOMETRIST

##### AOTO, KIM

Provider ID: 268720

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (800) 898-2020  
Fax: (844) 897-3788

After Hours Phone: (800)  
898-2020

Provider Gender: Female

NPI: 1780935650

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### PSYCHOLOGIST

##### TORRES, RANDALL

Provider ID: 306854

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

Phone: (619) 662-4100  
After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1871696435

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### BRAWLEY

#### PEDIATRIC CARDIOLOGY

##### 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

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## D. 专家名录

Network

### CAMPO

#### FAMILY PRACTICE

##### BAUM, PETER

Provider ID: 296383

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1174919971

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

#### FAMILY PRACTICE

##### ROGERS, MATTHEW

Provider ID: 294843

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1388 BUCKMAN SPRINGS RD  
CAMPO, CA 91906

Phone: (619) 662-4100

Fax: (619) 824-9071

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1639606130

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CARLSBAD

#### CERTIFIED NURSE

#### PRACTITIONER

##### HOOPER, BONNIE

Provider ID: 275252

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD  
STE 120  
CARLSBAD, CA 92011

Phone: (760) 884-5990

Fax: (760) 448-4404

After Hours Phone: (760)

884-5990

Provider Gender: Female

NPI: 1821062878

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

#### CERTIFIED NURSE

#### PRACTITIONER

##### RICE, ELIZABETH

Provider ID: 304664

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6010 HIDDEN VALLEY RD  
STE 200  
CARLSBAD, CA 92011

Phone: (760) 631-3000

Fax: (760) 631-3016

After Hours Phone: (760)  
631-3000

Provider Gender: Female

NPI: 1902470537

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None



American Sign Language (ASL):  
N

Accessibility: CONTACT

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## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC


### DERMATOLOGY

#### ZUBAIR, RAHEEL



Provider ID: 306519  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 6010 HIDDEN VALLEY RD  
STE 120  
CARLSBAD, CA 92011  
 Phone: (760) 448-4484  
Fax: (760) 448-4404  
 After Hours Phone: (760)  
448-4484  
Provider Gender: Male  
NPI: 1326493024  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC





### FAMILY PRACTICE

#### 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

### 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

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## D. 专家名录

 Website: N/A

IPA: Community Care IPA LLC

### NEUROLOGY


#### **YOSHII-CONTRERAS, JUNE**

Provider ID: 296589

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: 1437441763

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS

MEMORIAL HOSPITAL,

PALOMAR MEDICAL CENTER,

TRI CITY MEDICAL CTR,

SCRIPPS MERCY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


### OTOLARYNGOLOGY

#### **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

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

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## D. 专家名录

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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

☎ *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**

#### **MC GEE, 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*

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## D. 专家名录

### 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: 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

### 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

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## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **CARDIOVASCULAR DISEASE**

#### **LERNER, JONATHAN**

Provider ID: 303445  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 765 MEDICAL CENTER CT  
STE 211  
CHULA VISTA, CA 91911  
 Phone: (619) 616-2100  
Fax: (619) 616-2104  
 After Hours Phone: (619)  
616-2100  
Provider Gender: Male  
NPI: 1962899823  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **CERTIFIED ACUPUNCTURIST**

#### **LAM, KHANH**





Provider ID: 295381  
Board Certified 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**

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**BRACEY-ASIEDU,**

**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

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### **CERTIFIED NURSE PRACTITIONER**

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**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

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### **CERTIFIED NURSE PRACTITIONER**

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**BRAYTENBAH, MELANIE**

Provider ID: 295830

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 752 MEDICAL CENTER CT  
STE 302

CHULA VISTA, CA 91911

 Phone: (619) 421-3361

Fax: (619) 869-4378

 After Hours Phone: (619)  
421-3361

Provider Gender: Female

NPI: 1508370875


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

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### **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)

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## D. 专家名录

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 AVE STE 215  
CHULA VISTA, CA 91910  
☎ Phone: (619) 425-3840  
Fax: (619) 425-3842  
🕒 After Hours Phone: (619)  
425-3840  
Provider Gender: Female  
NPI: 1023178233  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-6PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

**DE DIOS, SARAH JANE**  
Provider ID: 302418  
Board Certified 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

**IBARRA, MARTHA**  
Provider ID: 308352  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 855 THIRD AVE STE 2220  
CHULA VISTA, CA 91911  
☎ Phone: (619) 662-4100  
Fax: (619) 662-4196  
🕒 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1114957289  
☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 14\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F  
8:30AM-5:30PM  
SA 8:30AM-2:30PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE


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## D. 专家名录

<b>PRACTITIONER</b>	
<b>LANE, KIMBERLY</b> 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 8:30AM-5:30PM SA 8AM-2:30PM Website: N/A IPA: IHP of Southern Cal-PHP	Provider Gender: Female NPI: 1497067862 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: BEVERLY HOSPITAL, TRI CITY MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM Website: N/A IPA: IHP of Southern Cal-PHP
<b>EMERGENCY MEDICINE</b>	
<b>DILLMAN, ARIANA</b> Provider ID: 290495 Board Certified Specialty: Yes IHP OF SOUTHERN CAL-PHP 333 H ST STE 2080 CHULA VISTA, CA 91910 Phone: (619) 662-4100 Fax: (661) 205-6305 After Hours Phone: (619) 662-4100	<b>EINSTEIN, ERIC</b> Provider ID: 290482 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 333 H ST STE 2080 CHULA VISTA, CA 91910 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100 Provider Gender: Male NPI: 1154683787 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: CORONA REGIONAL MED CTR Medi-Cal Open Panel: Yes
	Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM Website: N/A IPA: IHP of Southern Cal-PHP
<b>EMERGENCY MEDICINE</b>	
	<b>FRENCH, TONIANNE</b> Provider ID: 290538 Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP 333 H ST STE 2080 CHULA VISTA, CA 91910 Phone: (619) 662-4100 Fax: (619) 205-6305 After Hours Phone: (619) 662-4100 Provider Gender: Female NPI: 1770578411 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER




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## D. 专家名录


 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **EMERGENCY MEDICINE**

#### **GALASSO, MADISON**


Provider ID: 290477  
Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP  
 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619)  
662-4100

Provider Gender: Female  
NPI: 1053766766

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM



 Website: N/A  
IPA: IHP of Southern Cal-PHP


### **EMERGENCY MEDICINE**

#### **GRIESINGER, MICHAEL**


Provider ID: 290537  
Board Certified Specialty: Yes

IHP OF SOUTHERN CAL-PHP

 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305


 After Hours Phone: (619)  
662-4100

Provider Gender: Male  
NPI: 1336556604

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Adventist  
Health Bakersfield, SAN  
JOAQUIN GENERAL HOSP  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **EMERGENCY MEDICINE**

#### **PHAM, LILY**



Provider ID: 304935  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 386 E H ST STE 202  
CHULA VISTA, CA 91910  
 Phone: (858) 966-1720  
Fax: (858) 966-1725

 After Hours Phone: (858)

966-1720


Provider Gender: Female  
NPI: 1811423072


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A  
IPA: Rady Childrens Health  
Network

### **EMERGENCY MEDICINE**

#### **QUENZER, FAITH**

Provider ID: 290637  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100




Provider Gender: Female  
NPI: 1295112670

 Provider English Spoken: Y

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## D. 专家名录

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  
8:30AM-5:30PM  
SA 8:30AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **EMERGENCY MEDICINE**








#### **REARDON, JACQUELINE**

Provider ID: 290673  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1417928557  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




### **EMERGENCY MEDICINE**

#### **ROXAS, ROGER**

Provider ID: 290600  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 333 H ST STE 2080  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Male  
NPI: 1578910840  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


### **ENDOCRINOLOGY METABOLISM DIABETES**

#### **CARRILLO, MARITZA**

Provider ID: 290970  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 678 3RD AVE  
CHULA VISTA, CA 91910  
 Phone: (619) 662-4100  
Fax: (619) 425-1184  
 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1649628587


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
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

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## D. 专家名录

### RADY CHILDRENS HEALTH NETWORK

1637 THIRD AVENUE  
CHULA VISTA, CA 91911  
Phone: (619) 662-4100  
Fax: (619) 662-4196  
After Hours Phone: (619) 662-4100  
Provider Gender: Female  
NPI: 1639478811  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Rady Childrens Health Network

### **FAMILY PRACTICE**

#### VELASQUEZ, SHARON

Provider ID: 299164  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
678 3RD AVE  
CHULA VISTA, CA 91910  
Phone: (619) 662-4100  
Fax: (619) 425-1184  
After Hours Phone: (619)

662-4100  
Provider Gender: Female  
NPI: 1972732584  
Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8:30AM-5:30PM SA 8AM-2:30PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **GASTROENTEROLOGY**

#### SHAFFER, KATHERINE

Provider ID: 305510  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
296 H ST STE 301  
CHULA VISTA, CA 91910  
Phone: (619) 266-3332  
After Hours Phone: (619) 266-3332  
Provider Gender: Female  
NPI: 1336405695  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SHARP

CHULA VISTA MED CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **GASTROENTEROLOGY**

#### WIENER, GREGORY

Provider ID: 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

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## D. 专家名录

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

### 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


### GENERAL PRACTICE

#### **SAMI, REMAN**

Provider ID: 295214

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 678 3RD AVE  
CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1295362242

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### HEARING AID DEALER / SUPPLIER

#### **ANDERSON, ELAINE**


Provider ID: 268688

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 310 3RD AVE STE C11  
CHULA VISTA, CA 91910

 Phone: (619) 426-0841

Fax: (619) 426-9197

 After Hours Phone: (619)  
426-0841

Provider Gender: Female

NPI: 1063558856

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### HEARING AID DEALER / SUPPLIER

#### **DAVIS, KELLE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 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: No  
COMMUNITY CARE IPA LLC

765 MEDICAL CENTER CT  
STE 211

CHULA VISTA, CA 91911

Phone: (619) 616-2100

Fax: (619) 616-2104

After Hours Phone: (619)  
616-2100

Provider Gender: Male

NPI: 1831393289

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Swahili

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,

Adventist Health and Rideout

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

American Sign Language (ASL): CHULA VISTA MED CTR  
N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **NAGHI, JESSE**

Provider ID: 247625  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
752 MEDICAL CENTER CT  
STE 207  
CHULA VISTA, CA 91911  
Phone: (619) 867-0557  
Fax: (619) 867-0558  
After Hours Phone: (619)  
867-0557  
Provider Gender: Male  
NPI: 1386896736  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic, Bulgarian,  
Russian, Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, SCRIPPS MEMORIAL  
HOSPITAL, GROSSMONT  
HOSPITAL, SHARP MEMORIAL  
HOSPITAL, ALVARADO  
HOSPITAL LLC, SHARP CHULA  
VISTA MED CTR, SHARP

Medi-Cal Open Panel: Yes  
Min/Max 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

🕒 Hours: M-F 8AM-5PM  
 🌐 Website: N/A  
 IPA: 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, ALVARADO  
 HOSPITAL LLC, SHARP CHULA  
 VISTA MED CTR, TRI CITY  
 MEDICAL CTR, TRI CITY  
 MEDICAL CTR, SCRIPPS

MERCY HOSPITAL CHULA  
 VISTA, Sharp Grossmont  
 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 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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### INTERVENTIONAL CARDIOLOGY

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#### **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

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### MATERNAL AND FETAL MEDICINE


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#### **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

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### MATERNAL AND FETAL MEDICINE


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#### **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

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### MATERNAL AND FETAL MEDICINE

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#### **REIMERS, REBECCA**

Provider ID: 294653

Board Certified Specialty: No

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202  
CHULA VISTA, CA 91910

Phone: (858) 966-6710  
Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1801207634

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### MATERNAL AND FETAL MEDICINE

#### RICHARDSON, ALVIE

Provider ID: 264687

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202  
CHULA VISTA, CA 91910

Phone: (858) 966-6710  
Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Male

NPI: 1154305977

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, Sharp Grossmont Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### MATERNAL AND FETAL MEDICINE

#### WESTERMANN, MELISSA

Provider ID: 242523

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

386 E H ST STE 202  
CHULA VISTA, CA 91910

Phone: (858) 966-6710  
Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1760730758

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, EARL AND LORRAINE MILLER CHILDRENS HSP, LONG BEACH MEMORIAL MED CTR, UNIVERSITY OF CALIFORNIA IRVINE MED CTR, SHARP MEMORIAL HOSPITAL, GROSSMONT HOSPITAL, Sharp Grossmont Hospital, Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes

Min/Max 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

691-7000

Provider Gender: Female

NPI: 1679809826


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### NEONATAL / PERINATAL MEDICINE

#### **MATOBA, NANA**

Provider ID: 297976

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 435 H ST  
CHULA VISTA, CA 91910

 Phone: (619) 691-7000


Fax: (619) 260-7055

 After Hours Phone: (619)  
691-7000

Provider Gender: Female

NPI: 1801952197

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Japanese

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL


#### MEDICINE

#### **NIEMI, ANNA-KAISA**

Provider ID: 262159

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 435 H ST  
CHULA VISTA, CA 91910


 Phone: (858) 966-5818


Fax: (858) 966-7483

 After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1497941397

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Finnish, French,  
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


### CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

### 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


#### 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






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Hospital Affiliation: 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 AVE STE 4  
CHULA VISTA, CA 91910  
 Phone: (619) 427-1144  
 Fax: (619) 427-1185  
 After Hours Phone: (619)  
427-1144  
 Provider Gender: Female  
 NPI: 1235629932  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP  
CHULA VISTA MED CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

 Website: N/A  
IPA: IHP of Southern Cal-PHP


Imperial Health Holdings  
Medical Group-SD


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,

### 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,

### 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):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings

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## D. 专家名录

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**

**HOSSEINZADEHMALEKI, 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

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## D. 专家名录




### 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 AVE STE 215  
 CHULA VISTA, CA 91910  
 Phone: (619) 425-3840  
 Fax: (619) 425-3842  
 After Hours Phone: (619)  
 425-3840

Provider Gender: Male  
 NPI: 1881182079  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hindi, Spanish,  
 Tagalog  
 Cultural Competency: N  
 Hospital Affiliation: SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SCRIPPS MERCY  
 HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### NEUROLOGY







#### MOHAMMAD, AHMADSHAH

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

#### SORIALOPEZ, 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

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 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

*Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, SCRIPPS MERCY  
HOSPITAL CHULA VISTA,  
TEMECULA VALLEY HOSPITAL  
INC*  
*Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-6PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### **OBSTETRICS / GYNECOLOGY**

#### **ATIGA, SCHUBERT**




*Provider ID: 268953  
Board Certified Specialty: Yes  
COMMUNITY CARE IPA LLC*  
 *752 MEDICAL CENTER CT  
STE 106  
CHULA VISTA, CA 91911*  
 *Phone: (619) 482-8406*  
*Fax: (619) 482-6656*  
 *After Hours Phone: (619)  
482-8406*  
*Provider Gender: Male  
NPI: 1033138714*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,*

*PARADISE VALLEY HOSPITAL 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-0PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP*

### **OBSTETRICS / GYNECOLOGY**

#### **ATIGA, SCHUBERT**

*Provider ID: 290331  
Board Certified Specialty: Yes  
IHP OF SOUTHERN CAL-PHP*  
 *752 MEDICAL CENTER CT  
STE 106  
CHULA VISTA, CA 91911*  
 *Phone: (619) 482-8406*  
*Fax: (619) 482-6656*  
 *After Hours Phone: (619)  
482-8406*  
*Provider Gender: Male  
NPI: 1033138714*  
 *Provider English Spoken: Y*  
 *Provider Language(s)  
Spoken: Spanish, Tagalog  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
PARADISE VALLEY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 13\None  
American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-TH 8AM-5PM  
F 8AM-0PM*  
 *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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 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: Community Care IPA LLC,  
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

### 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 AVE STE A  
CHULA VISTA, CA 91911

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 Phone: (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: 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**


#### **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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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: 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**

**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,  
Imperial Health Holdings  
Medical Group-SD

### **OPTOMETRIST**

**NGUYEN, THU**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 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: 265518

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471  
Fax: (619) 422-0450

After Hours Phone: (619)  
422-1471

Provider Gender: Female  
NPI: 1326323627

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish, Tagalog,  
Vietnamese

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### OPTOMETRIST

#### RICHARDSON, JULIA

Provider ID: 297645

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471  
Fax: (619) 422-2025

After Hours Phone: (619)  
422-1471

Provider Gender: Female  
NPI: 1770154528

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### OPTOMETRIST

#### SCOVILL, ALEXANDRA

Provider ID: 297625

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

342 F ST  
CHULA VISTA, CA 91910

Phone: (619) 422-1471  
Fax: (619) 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **OPTOMETRIST**

#### **TRAN, JESSICA**

Provider ID: 304888

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

340 FOURTH AVESTE 19  
CHULA VISTA, CA 91910

Phone: (619) 761-5308

Fax: (619) 591-1910

After Hours Phone: (619)  
761-5308

Provider Gender: Female

NPI: 1457922957

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OTOLARYNGOLOGY**

#### **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,  
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### **OTOLARYNGOLOGY**

#### **SAEZ, NEIL**

Provider ID: 302432

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

765 MEDICAL CENTER CT  
STE 210  
CHULA VISTA, CA 91911

Phone: (619) 482-0565

Fax: (619) 482-2775

After Hours Phone: (619)  
482-0565

Provider Gender: Male

NPI: 1518456508

Provider English Spoken: Y  
Provider Language(s)

Spoken: Spanish  
Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,

SHARP MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL

CHULA VISTA

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录








 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*


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### PEDIATRIC EMERGENCY MEDICINE

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#### **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*

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### PEDIATRIC EMERGENCY MEDICINE

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#### **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*

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### PEDIATRIC EMERGENCY MEDICINE

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#### **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*

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### PEDIATRIC EMERGENCY MEDICINE

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#### **GROSS, MATTHEW**

*Provider ID: 297176*  
*Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 386 E H ST STE 202  
CHULA VISTA, CA 91910

 Phone: (858) 966-1720  
Fax: (858) 966-1725

 After Hours Phone: (858)  
966-1720

Provider Gender: Male

NPI: 1942223664


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### 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

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### 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

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### 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

American Sign Language (ASL): IPA: IHP of Southern Cal-PHP  
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


### **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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Hospital Affiliation: 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**

#### **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**

#### **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

 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

☎ After Hours Phone: (619) 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 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: 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 AVE STE 1100  
CHULA VISTA, CA 91911

☎ Phone: (619) 880-5057

Fax: (858) 485-1515

☎ After Hours Phone: (619) 880-5057

Provider Gender: Male

NPI: 1033554324

☐ Provider English Spoken: Y

☐ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAWEAH

DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL,

ADVENTIST MEDICAL

CENTER, ADVENTIST MED CTR

REEDLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### 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

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):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

#### PODIATRIST

##### DAVIDSONIII, JOHN

Provider ID: 129545

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

345 F ST STE 100

CHULA VISTA, CA 91910

Phone: (619) 427-3481

Fax: (619) 420-7807

After Hours Phone: (619)  
427-3481

Provider Gender: Male

NPI: 1689069874

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA

MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC

#### PODIATRIST

##### READ, TRENTON

Provider ID: 296655

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

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## D. 专家名录

### 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-8PM  
SA 8AM-4PM

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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 678 3RD AVE  
CHULA VISTA, CA 91910


 Phone: (619) 662-4100

Fax: (619) 271-0260

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1104297696


 Provider English Spoken: Y


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### PSYCHOLOGIST

**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

---

### RADIATION ONCOLOGY

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## D. 专家名录

### **VOLPP, PAUL**

Provider ID: 221102

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 769 MEDICAL CENTER CT  
CHULA VISTA, CA 91911

☎ Phone: (619) 502-5851

Fax: (619) 502-5865

🕒 After Hours Phone: (619)  
502-5851

Provider Gender: Male

NPI: 1225186232

🗣 Provider English Spoken: Y

🗣 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **REGISTERED PHYSICAL**

#### **THERAPIST**

### **CHENG, BRANDON**

Provider ID: 304529

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 1392 E PALOMAR ST STE  
503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

🕒 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1336894724

🗣 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TH 7AM-7PM

F 7AM-5PM

SA 8AM-1PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL**

#### **THERAPIST**

### **CHENG, BRANDON**

Provider ID: 307786

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

📍 1392 E PALOMAR ST STE  
503

CHULA VISTA, CA 91913

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

🕒 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1336894724

🗣 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TH 7AM-7PM

F 7AM-5PM

SA 8AM-1PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **REGISTERED PHYSICAL**

#### **THERAPIST**

### **JAIN, ALEXANDRA**

Provider ID: 305150

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 880 THIRD AVE STE A  
CHULA VISTA, CA 91911

☎ Phone: (619) 205-4585

Fax: (619) 271-3183

🕒 After Hours Phone: (619)  
205-4585

Provider Gender: Female

NPI: 1063170603

🗣 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):

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **JIMENEZ, ANDREA**

Provider ID: 299889  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1392 E PALOMAR ST STE 503  
CHULA VISTA, CA 91913  
 Phone: (619) 482-3000  
Fax: (619) 482-3001  
 After Hours Phone: (619) 482-3000  
Provider Gender: Female  
NPI: 1407440670  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 7AM-7PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP




### REGISTERED PHYSICAL

### THERAPIST

#### **KARANDE, PRACHI**



Provider ID: 287100  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1392 E PALOMAR ST STE 503  
CHULA VISTA, CA 91913  
 Phone: (619) 482-3000  
Fax: (619) 482-3001  
 After Hours Phone: (619) 482-3000  
Provider Gender: Female  
NPI: 1699357525  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):

N



 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST




#### **KARANDE, PRACHI**

Provider ID: 301380  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1392 E PALOMAR ST STE 503  
CHULA VISTA, CA 91913  
 Phone: (619) 482-3000

Fax: (619) 482-3001





 After Hours Phone: (619) 482-3000  
Provider Gender: Female  
NPI: 1699357525  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **NGUYEN, TIA**

Provider ID: 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


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## D. 专家名录

American Sign Language (ASL): IHP of Southern Cal-PHP

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,

### REGISTERED PHYSICAL THERAPIST


#### **NOVENCIDO, ANDREW**

Provider ID: 286782

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1392 E PALOMAR ST STE  
503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **NOVENCIDO, ANDREW**


Provider ID: 301994

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1392 E PALOMAR ST STE

503

CHULA VISTA, CA 91913

 Phone: (619) 482-3000

Fax: (619) 482-3001

 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST


#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M 7AM-7PM*  
*TU 7AM-0PM*  
*W-TH 7AM-7PM*  
*F 7AM-0PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*


### REGISTERED PHYSICAL THERAPIST


#### **SPARKS, TODD**

*Provider ID: 301108*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
 *Phone: (619) 482-3000*  
*Fax: (619) 482-3001*  
 *After Hours Phone: (619)*  
*482-3000*  
*Provider Gender: Male*  
*NPI: 1265481139*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*

*American Sign Language (ASL): IHP of Southern Cal-PHP*  
*N*



 *Accessibility: CONTACT*  
*PROVIDER*


 *Hours: M 7AM-7PM*  
*TU 7AM-0PM*  
*W-TH 7AM-7PM*  
*F 7AM-0PM*

 *Website: N/A*  
*IPA: Community Care IPA LLC,*  
*IHP of Southern Cal-PHP*



### REGISTERED PHYSICAL THERAPIST

#### **STAHL, KEVIN**

*Provider ID: 301418*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1392 E PALOMAR ST STE  
503  
CHULA VISTA, CA 91913  
 *Phone: (619) 482-3000*  
*Fax: (619) 482-3001*  
 *After Hours Phone: (619)*  
*482-3000*  
*Provider Gender: Male*  
*NPI: 1760194302*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*


*IPA: Community Care IPA LLC,*

### 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

#### **VILLANUEVA, GIOVANNI**

*Provider ID: 301532*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1392 E PALOMAR ST STE

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## D. 专家名录

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  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### SPEECH PATHOLOGIST

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### **CLARK, MELISSA**

Provider ID: 296923

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

333 H ST STE 5000  
CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1760546428

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 7AM-7PM  
M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**

#### **DURNAN, CASSANDRA**

Provider ID: 307884

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

333 H ST STE 5000  
CHULA VISTA, CA 91910

Phone: (877) 757-8353

Fax: (818) 357-2505

After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1073873501

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 7AM-7PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **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





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## D. 专家名录

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

### **CMP PENDLETON**

#### **CERTIFIED NURSE PRACTITIONER**

#### **FREEMAN, WANDA**

Provider ID: 298117  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 619 CROUCH ST  
CMP PENDLETON, CA  
92054  
 Phone: (760) 736-6767  
 After Hours Phone: (760)  
736-6767  
Provider Gender: Female

NPI: 1659504264  
 Provider English Spoken: Y  
Cultural Competency: N  
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

### **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

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## D. 专家名录


 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**

### CARDIOVASCULAR DISEASE

#### **LERNER, JONATHAN**

Provider ID: 303446  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1625 E MAIN ST STE 201

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## D. 专家名录

EL CAJON, CA 92021  
☎ Phone: (619) 486-6512  
Fax: (619) 616-2104  
🕒 After Hours Phone: (619) 486-6512  
Provider Gender: Male  
NPI: 1962899823  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC

### **CERTIFIED ACUPUNCTURIST**

**CRAFT, KEVIN**  
Provider ID: 290945  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 855 E MADISON AVE  
EL CAJON, CA 92020  
☎ Phone: (619) 440-2751  
Fax: (360) 462-2746  
🕒 After Hours Phone: (619) 440-2751  
Provider Gender: Male  
NPI: 1659745610  
🗣 Provider English Spoken: Y

🗣 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: TU-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **CERTIFIED 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**

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## D. 专家名录

### **PIRTLE, KEYSHONE**

Provider ID: 284244

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

5442 SYCUAN RD  
EL CAJON, CA 92019

Phone: (619) 445-0707

Fax: (619) 445-9764

After Hours Phone: (619)  
445-0707

Provider Gender: Male

NPI: 1417567827

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-4PM

Website: N/A

IPA: Community Care IPA LLC

### **CERTIFIED NURSE PRACTITIONER**

### **WILLIAMS, SHANTRICE**

Provider ID: 296007

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: 1578865549

Provider English Spoken: Y

Provider Language(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-2PM

TU-F 8AM-5PM

Website: N/A

IPA: 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

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 Website: N/A  
IPA: Community Care IPA LLC,  
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

#### **AWDISHO, ALAN**


Provider ID: 291282  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Male  
NPI: 1164795498  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Assyrian, Syriac  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### INTERNAL MEDICINE

#### **MAY, LOUIS**

Provider ID: 294916

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 875 EL CAJON BLVD  
EL CAJON, CA 92020

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

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)

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## D. 专家名录




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, ALVARADO  
HOSPITAL LLC, SHARP CHULA  
VISTA MED CTR, TRI CITY  
MEDICAL CTR, TRI CITY  
MEDICAL CTR, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, Sharp Grossmont  
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  
 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

### INTERVENTIONAL CARDIOLOGY

**SUDHAKAR, DEEPTHI**  
Provider ID: 295843  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1625 E MAIN ST STE 201  
EL CAJON, CA 92021  
 Phone: (619) 486-6512  
Fax: (619) 616-2104  
 After Hours Phone: (619)

486-6512  
Provider Gender: Female  
NPI: 1811307051  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Sharp  
Grossmont Hospital, SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 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

### 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

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至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 265073

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

### 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

### 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

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## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**


**ROSENBLATT, SHERILYN**  
Provider ID: 305449  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
Fax: (619) 205-6305  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1114041621  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**






**ARAIZA, ERNESTINA**  
Provider ID: 290286  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
Fax: (619) 785-3356  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1568608636  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**

**CASEY, SHANNON**  
Provider ID: 306785  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 215 W MADISON AVE  
EL CAJON, CA 92020  
 Phone: (760) 737-6935  
Fax: (760) 741-2782  
 After Hours Phone: (760)  
737-6935  
Provider Gender: Female




NPI: 1548873755  
 Provider English Spoken: Y  
 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**

**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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-7PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP*


### PSYCHOLOGIST

#### **GUARDADO-SOTO, RAQUEL**

*Provider ID: 290342*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 855 E MADISON AVE  
EL CAJON, CA 92020

 *Phone: (619) 440-2751*

*Fax: (360) 462-2746*

 *After Hours Phone: (619)  
440-2751*

*Provider Gender: Female*


*NPI: 1194999276*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 13\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### PSYCHOLOGIST


#### **WHEELER, KIM**

*Provider ID: 302144*


*Board Certified 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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

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**ANESTHESIOLOGY**

**HYLTON, DIANA**  
Provider ID: 277248  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
1415 ROSS AVE  
EL CENTRO, CA 92243  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1932527751  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

---

**ANESTHESIOLOGY**

**KRAUSE, MARTIN**  
Provider ID: 287653

Board Certified Specialty: No  
UCSD MEDICAL GROUP  
1415 ROSS AVE  
EL CENTRO, CA 92243  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1417243239  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: German  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: UCSD Medical Group

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**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

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**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




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## D. 专家名录



*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **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*

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## D. 专家名录

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **GUITTARD, JESSE**

Provider ID: 239878

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (760) 339-7100

 After Hours Phone: (760)  
339-7100

Provider Gender: Male

NPI: 1770979890

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**


#### **HERNANDEZ, CRISTINA**

Provider ID: 242543

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1164765046

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **HORNBEAK, KIRSTEN**

Provider ID: 240024

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (760) 339-7100

 After Hours Phone: (760)  
339-7100

Provider Gender: Female

NPI: 1205214442

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **HUTCHISON, HEIDI**

Provider ID: 272661

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 1415 ROSS AVE  
EL CENTRO, CA 92243

 Phone: (760) 339-7100

Fax: (760) 352-7612

 After Hours Phone: (760)

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## D. 专家名录

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**

**ICHWAN, DANIEL**  
Provider ID: 283222  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1740711589  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

**RUDOLF, FRANCES**  
Provider ID: 240161  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (760) 339-7000  
 After Hours Phone: (760)  
339-7000  
Provider Gender: Female  
NPI: 1821487430  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

**TANAKA, HIDEAKI**  
Provider ID: 239824  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP  
 1415 ROSS AVE  
EL CENTRO, CA 92243  
 Phone: (800) 826-8273  
 After Hours Phone: (800)  
826-8273  
Provider Gender: Male  
NPI: 1124280730  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: EL  
CENTRO REGIONAL MEDICAL  
CENTER, Sharp Grossmont  
Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: SU 8AM-8PM  
M-F 8AM-5PM  
SA 8AM-8PM  
 Website: N/A  
IPA: UCSD Medical Group

### **INFECTIOUS DISEASE**

**AKRAMI, KEVAN**  
Provider ID: 277342  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

 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,

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## D. 专家名录

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

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### 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

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## D. 专家名录

### 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: 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

---

### **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**

**GONZALEZ, ANDRES**

Provider ID: 298659

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

1130 2ND ST  
ENCINITAS, CA 92024

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1841857729

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese, 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

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### **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

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### **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

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## D. 专家名录

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *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**

*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)*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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

### 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


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## D. 专家名录

 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

### 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

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## D. 专家名录

STE 200  
ENCINITAS, CA 92024  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1144486929  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, EARL AND  
LORRAINE MILLER  
CHILDRENS HSP, LONG  
BEACH MEMORIAL MED CTR,  
Providence St Joseph Hospital,  
Providence St Jude Medical  
Center, ORANGE COAST MEM  
MED CTR, FOUNTAIN VALLEY  
REGIONAL HOSP AND MED  
CTR, FOUNTAIN VALLEY  
REGIONAL HOSP AND MED  
CTR, CORONA REGIONAL  
MED CTR, UCSD LA JOLLA  
JOHN SALLY THORNTON,  
UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### HOSPICE AND PALLIATIVE MEDICINE

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**RUBENZI, 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

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### HOSPICE AND PALLIATIVE MEDICINE

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**RUBENZI, 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

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### MATERNAL AND FETAL MEDICINE

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**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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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

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## D. 专家名录



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






Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
Network

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

#### 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

**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




#### 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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录




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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 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)

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## D. 专家名录

944-5545  
Provider Gender: Female  
NPI: 1174870067  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, CHILDRENS  
HOSPITAL OF ORANGE  
COUNTY, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Rady Childrens Health  
Network

### NEUROLOGY CHILD

**SAHAGIAN, MICHELLE**  
Provider ID: 206073  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024  
Phone: (760) 944-5545  
Fax: (760) 944-3927  
After Hours Phone: (760)  
944-5545  
Provider Gender: Female  
NPI: 1275604035

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 8AM-5PM  
Website: N/A  
IPA: Rady Childrens Health  
Network

### OBSTETRICS / GYNECOLOGY

**BINDER, PRATIBHA**  
Provider ID: 282167  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
1200 GARDEN VIEW RD  
STE 200  
ENCINITAS, CA 92024  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1174758031  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes

Min/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**

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## D. 专家名录

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**

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## D. 专家名录

### **MACKAY, GILLIAN**

Provider ID: 303061

Board Certified Specialty: No  
UCSD MEDICAL GROUP

1200 GARDEN VIEW RD  
ENCINITAS, CA 92024

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

### **BANSAL, PREETI**

Provider ID: 205617

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302

ENCINITAS, CA 92024

Phone: (858) 309-7702

Fax: (760) 944-3927

After Hours Phone: (858)  
309-7702

Provider Gender: Female

NPI: 1871664631

Provider English Spoken: Y

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

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## D. 专家名录

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,

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## D. 专家名录


SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### OPTOMETRIST

**AOTO, KIM**


Provider ID: 296797

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024


 Phone: (760) 943-7141

Fax: (760) 943-0371

 After Hours Phone: (760)  
943-7141

Provider Gender: Female

NPI: 1780935650

 Provider English Spoken: Y


 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M 9AM-5PM

TU 8:30AM-4:30PM

W 7:30AM-4:30PM

TH 9:30AM-5PM

F 8:30AM-4PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OTOLARYNGOLOGY


**BLISS, MORGAN**

Provider ID: 206085

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 477 N EL CAMINO REAL  
STE 302

ENCINITAS, CA 92024

 Phone: (760) 944-5545

Fax: (760) 944-3927

 After Hours Phone: (760)  
944-5545

Provider Gender: Female

NPI: 1760707657

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network

### 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

ENCINITAS, CA 92024  
☎ Phone: (760) 944-5545  
Fax: (760) 944-3927  
🕒 After Hours Phone: (760) 944-5545  
Provider Gender: Female  
NPI: 1124230909  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### OTOLARYNGOLOGY

**PATEL, VIJAY**  
Provider ID: 297035  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 477 N EL CAMINO REAL STE D302  
ENCINITAS, CA 92024  
☎ Phone: (760) 944-5545  
Fax: (760) 944-3927  
🕒 After Hours Phone: (760)

944-5545  
Provider Gender: Male  
NPI: 1508250747  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC ALLERGY / IMMUNOLOGY

**GREINER, ALEXANDER**  
Provider ID: 205696  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 477 N EL CAMINO REAL STE D302  
ENCINITAS, CA 92024  
☎ Phone: (858) 966-4900  
Fax: (760) 944-3927  
🕒 After Hours Phone: (858) 966-4900  
Provider Gender: Male  
NPI: 1609801299  
☑ Provider English Spoken: Y

☑ Provider Language(s)  
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

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## D. 专家名录


**DIEGO**

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health  
Network


### PEDIATRIC 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 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

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## D. 专家名录

### **GASTROENTEROLOGY**

#### **YOUNG, JOCELYN**

Provider ID: 294676

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

Phone: (760) 944-5545  
Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Female  
NPI: 1306227491

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UC DAVIS  
MEDICAL CTR, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC PULMONOLOGY**

#### **CERNELC-KOHAN, MATEJKA**

Provider ID: 243043

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE 302 BLDG D  
ENCINITAS, CA 92024

Phone: (760) 944-5545  
Fax: (760) 944-3927

After Hours Phone: (760)  
944-5545

Provider Gender: Female  
NPI: 1871752451

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **PEDIATRIC PULMONOLOGY**

#### **LENHART-PENDERGRASS, PATRICIA**

Provider ID: 294642

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

477 N EL CAMINO REAL  
STE D302

ENCINITAS, CA 92024

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


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## D. 专家名录

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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

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

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## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

Min/Max Age: 0\19

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### 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, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes


### 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


### SURGERY PLASTIC


#### **REID, CHRISTOPHER**

Provider ID: 238130

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: 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

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## D. 专家名录

Network, UCSD Medical Group

### ESCONDIDO


#### ANESTHESIOLOGY PAIN MANAGEMENT

##### **BROWNLOW, ROY**


Provider ID: 308112

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 637 E GRAND AVE  
ESCONDIDO, CA 92025


 Phone: (760) 610-0522

Fax: (760) 610-0523

 After Hours Phone: (760)  
610-0522

Provider Gender: Male

NPI: 1205949914

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SHARP CORONADO HOSP  
AND HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### 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

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 21\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 7AM-4PM  
SA 7AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CARDIOVASCULAR DISEASE

#### LERNER, JONATHAN

Provider ID: 309268

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: 1962899823

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### CERTIFIED 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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N









 **Accessibility: CONTACT PROVIDER**  
 **Hours: M-F 8AM-5PM**  
 **Website: N/A**  
**IPA: Rady Childrens Health Network**

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### **CERTIFIED NURSE PRACTITIONER**

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**JANNESARI, ROYA**

**Provider ID: 302339**  
**Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP**  
 **625 CITRACADO PKWY STE 108  
ESCONDIDO, CA 92025**  
 **Phone: (760) 743-1431**  
**Fax: (760) 743-6455**  
 **After Hours Phone: (760) 743-1431**  
**Provider Gender: 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**

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### **CERTIFIED NURSE**








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### **PRACTITIONER**

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**KESHAVARZI, SARA**



**Provider ID: 305938**  
**Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP**  
 **488 E VALLEY PKWY STE 411  
ESCONDIDO, CA 92025**  
 **Phone: (760) 466-9800**  
**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**

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### **CERTIFIED NURSE PRACTITIONER**




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**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**

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### **CERTIFIED NURSE PRACTITIONER**

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**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**

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## D. 专家名录

CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **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  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

☎ After Hours Phone: (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

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### 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

### 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

### 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

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## D. 专家名录





### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\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

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## D. 专家名录

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

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

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

### 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

### 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

 *Provider English Spoken: Y*  
*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

#### **SUTTNER, DENISE**

*Provider ID: 206137*  
*Board Certified Specialty: No*

#### *RADY CHILDRENS HEALTH NETWORK*


 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

 *Phone: (442) 281-2850*  
*Fax: (442) 281-2999*

 *After Hours Phone: (442) 281-2850*

*Provider Gender: Female*  
*NPI: 1457433799*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

#### **SWEENEY, NATHALY**

Provider ID: 283801

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

☎ Phone: (442) 281-3193

Fax: (442) 281-3197

🕒 After Hours Phone: (442)  
281-3193

Provider Gender: Female

NPI: 1164572632

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, RADY

CHILDRENS HOSPITAL SAN

DIEGO, PALOMAR MEDICAL

CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### NEPHROLOGY

#### **AL-DAHHAN, ZAID**

Provider ID: 297898

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 631 E GRAND AVE  
ESCONDIDO, CA 92025

☎ Phone: (760) 294-1660

Fax: (760) 745-5016

🕒 After Hours Phone: (760)  
294-1660

Provider Gender: Male

NPI: 1740716828

🗣 Provider English Spoken: Y

🗣 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: PALOMAR  
MEDICAL CENTER, PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 9AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### NEUROLOGY

#### **GOLD, JEFFREY**

Provider ID: 277870

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 2125 CITRACADO PKWY  
STE 100

ESCONDIDO, CA 92029

☎ Phone: (760) 294-9260

Fax: (760) 294-9274

🕒 After Hours Phone: (760)  
294-9260

Provider Gender: Male

NPI: 1568773984

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL

OAKLAND, SHARP MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### NEUROLOGY

#### **JINDAL, ANUJA**

Provider ID: 277838

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 2125 CITRACADO PKWY  
STE 100

ESCONDIDO, CA 92029

☎ Phone: (760) 294-9260

Fax: (760) 294-9274

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (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*

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N  
IPA: Community Care IPA LLC,  
Rady Childrens Health

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: 285629

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

488 E VALLEY PKWY STE  
400  
ESCONDIDO, CA 92025

Phone: (760) 658-6101

Fax: (760) 658-6106

After Hours Phone: (760)  
658-6101

Provider Gender: Male

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: 285628

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1955 CITRACADO PKWY

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## D. 专家名录

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**

#### **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)




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录





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





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## D. 专家名录

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

### **OPHTHALMOLOGY**

#### **SHEILS, CATHERINE**

Provider ID: 305307  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 700 W EL NORTE PKWY  
ESCONDIDO, CA 92026  
 Phone: (800) 765-2737  
Fax: (619) 291-6577  
 After Hours Phone: (800)  
765-2737  
Provider Gender: Female  
NPI: 1932605649  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU 8:30AM-4PM  
W-F 8:30AM-1PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

UCSD Medical Group

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### 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: 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

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### 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,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

IHP of Southern Cal-PHP

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### OTOLARYNGOLOGY

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#### BLISS, MORGAN

Provider ID: 277537

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

Phone: (760) 755-7600  
Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Provider Gender: Female  
NPI: 1760707657

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

---

### OTOLARYNGOLOGY

---

#### FRIESEN, TZYYNONG

Provider ID: 277853

Board Certified Specialty: No

RADY CHILDRENS HEALTH  
NETWORK

2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

Phone: (760) 755-7600  
Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Provider Gender: Female  
NPI: 1952740177

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

---

### 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录



 Website: N/A  
IPA: Rady Childrens Health  
Network

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### **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


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### **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


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### **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


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### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

*Provider Gender: Female*  
*NPI: 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*

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### **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*

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### **PEDIATRIC EMERGENCY MEDICINE**

**GROSS, MATTHEW**  
*Provider ID: 297178*  
*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: 1942223664*  
 *Provider English Spoken: Y*

*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

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### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): DIEGO, VALLEY CHILDRENS HOSPITAL

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


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### **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


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### **PEDIATRIC EMERGENCY MEDICINE**

**QUINONES-PEREZ, BIANCA**

Provider ID: 277810

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029


 Phone: (760) 739-1543


Fax: (760) 294-9274

 After Hours Phone: (760)  
739-1543

Provider Gender: Female

NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


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### **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,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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 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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*


### PEDIATRICS

#### **CAMERON, MELISSA**

*Provider ID: 205966*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

 *Phone: (442) 281-2850*

*Fax: (442) 281-2999*

 *After Hours Phone: (442)  
281-2850*

*Provider Gender: Female*

*NPI: 1902983752*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, PALOMAR MEDICAL  
CENTER*


*Medi-Cal Open Panel: Yes*


*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health*

*Network*


### PEDIATRICS

#### **FIGUEROA RODRIGUEZ, BRENDA**

*Provider ID: 306823*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 425 N DATE ST  
ESCONDIDO, CA 92025


 *Phone: (833) 867-4642*

*Fax: (858) 633-4693*

 *After Hours Phone: (833)  
867-4642*

*Provider Gender: Female*

*NPI: 1134205214*

 *Provider English Spoken: Y*

 *Provider Language(s)*

*Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: Sharp*


*Grossmont Hospital*


*Medi-Cal Open Panel: Yes*


*Min/Max Age: 0\18*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

### PHYSICAL MEDICINE / REHABILITATION

#### **RICHARDSON, HENRY**


*Provider ID: 295277*

*Board Certified Specialty: No*

*IHP OF SOUTHERN CAL-PHP*

 1955 CITRACADO PKWY  
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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (760) 294-9274

☎ After Hours Phone: (760) 294-9260

Provider Gender: Male

NPI: 1447645742

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### **PHYSICIANS ASSISTANT**

#### **CHATFIELD, ALEXANDRA**

Provider ID: 276716

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 1955 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

☎ Phone: (760) 743-4789

Fax: (858) 673-5187

☎ After Hours Phone: (760)  
743-4789

Provider Gender: Female

NPI: 1215584628

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **PHYSICIANS ASSISTANT**

#### **CORVINI, NICOLAS**

Provider ID: 296999

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 425 N DATE ST  
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8300

Fax: (858) 633-4698

☎ After Hours Phone: (760)  
520-8300

Provider Gender: Male

NPI: 1194242461

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **FUNARI, CHRISTOPHER**

Provider ID: 301993

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

📍 625 CITRACADO PKWY STE  
108

ESCONDIDO, CA 92025

☎ Phone: (760) 743-1431

Fax: (760) 743-6455

☎ After Hours Phone: (760)  
743-1431

Provider Gender: Male

NPI: 1982365490

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **GANGJI, SHAZMIN**

Provider ID: 298110

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 460 N ELM ST  
ESCONDIDO, CA 92025

☎ Phone: (760) 520-8100

Fax: (360) 462-2745

☎ After Hours Phone: (760)  
520-8100

Provider Gender: Female

NPI: 1346763638

☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

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## D. 专家名录


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Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL): RADY CHILDRENS HEALTH NETWORK

 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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL): Board Certified Specialty: No  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **PODIATRIST**


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#### **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

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### **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

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

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### **PODIATRIST**


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#### **READ, TRENTON**

Provider ID: 300882

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 215 S HICKORY ST STE 118  
ESCONDIDO, CA 92025

 Phone: (760) 480-1189

Fax: (858) 485-1515

 After Hours Phone: (760)  
480-1189

Provider Gender: Male

NPI: 1952963431

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health

Network

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### **PSYCHOLOGIST**


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#### **CARLTON-PENN, CORNELIA**

Provider ID: 290406

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760)  
520-8340

Provider Gender: Female

NPI: 1891720611

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: German

Cultural Competency: N

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

**ESTRADA PATINO, ANGELA**


Provider ID: 296605

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 460 N ELM ST

ESCONDIDO, CA 92025


 Phone: (760) 520-8100

Fax: (360) 462-2745

 After Hours Phone: (760) 520-8100

Provider Gender: Female

NPI: 1629339015

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST


**SUOZZO, JOSEPH**

Provider ID: 290758

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760) 520-8340

Provider Gender: Male

NPI: 1821013228


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST


**TEETER-WITT, ALYSSA**

Provider ID: 290891

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

Provider Gender: Female

NPI: 1932308442

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST


**TEETER-WITT, ALYSSA**

Provider ID: 290779

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 426 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 690-5900

Fax: (858) 633-4693

 After Hours Phone: (760) 690-5900

Provider Gender: Female

NPI: 1932308442

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **VALLEZ-BARLAM, ANDREA**

Provider ID: 290631

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

488 E VALLEY PKWY STE  
404

ESCONDIDO, CA 92025

Phone: (760) 466-9800

Fax: (858) 633-4693

After Hours Phone: (760)  
466-9800

Provider Gender: Female

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**

### **VALLEZ-BARLAM, ANDREA**

Provider ID: 290630

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

426 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 690-5900

Fax: (858) 633-4693

After Hours Phone: (760)

690-5900

Provider Gender: Female

NPI: 1710902143

Provider English Spoken: Y

Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### **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

### **PSYCHOLOGIST**

### **WOODWORTH, JENNIFER**

Provider ID: 290634

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

425 N DATE ST

ESCONDIDO, CA 92025

Phone: (760) 520-8340

Fax: (858) 633-4698

After Hours Phone: (760)  
520-8340

Provider Gender: Female

NPI: 1639362494

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### **PULMONARY DISEASES**

### **QUAN, MICHELE GRACE**

Provider ID: 287097

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC






2125 CITRACADO PKWY  
STE 230

ESCONDIDO, CA 92029

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。









## D. 专家名录

 Phone: (760) 489-1458  
Fax: (760) 489-1246  
 After Hours Phone: (760) 489-1458  
Provider Gender: Female  
NPI: 1629462882  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: REDLANDS COMMUNITY HOSP  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**




#### **COLEMAN, LORI**




Provider ID: 221090  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 2125 CITRACADO PKWY STE 110  
ESCONDIDO, CA 92029  
 Phone: (760) 739-3371  
Fax: (760) 739-3779  
 After Hours Phone: (760) 739-3371  
Provider Gender: Female  
NPI: 1053348920  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
PALOMAR MEDICAL CENTER,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 19\100  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **RADIATION ONCOLOGY**







#### **VOLPP, PAUL**

Provider ID: 221103  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 2125 CITRACADO PKWY STE 110  
ESCONDIDO, CA 92029  
 Phone: (760) 739-3371  
Fax: (760) 739-3779  
 After Hours Phone: (760) 739-3371  
Provider Gender: Male  
NPI: 1225186232  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,  
GROSSMONT HOSPITAL,  
PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 19\100  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-4PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录




 Website: N/A  
IPA: 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**


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#### **CLARK, MELISSA**

Provider ID: 296924

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD  
STE 150  
ESCONDIDO, CA 92025


 Phone: (877) 757-8353


Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1760546428

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 7AM-7PM  
M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **SPEECH PATHOLOGIST**


---

#### **DURNAN, CASSANDRA**

Provider ID: 307881

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 500 LA TERRAZA BLVD  
STE 150  
ESCONDIDO, CA 92025

 Phone: (877) 757-8353

Fax: (818) 357-2505

 After Hours Phone: (877)  
757-8353

Provider Gender: Female

NPI: 1073873501

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 7AM-7PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **SURGERY GENERAL**

#### **CASILLAS BERUMEN, SERGIO**

Provider ID: 304606

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2185 CITRACADO PKWY  
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

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## D. 专家名录


 *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: 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 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 PEDIATRIC**

#### **KLING, KAREN**

*Provider ID: 206130*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH*  
*NETWORK*

 625 CITRACADO PKWY STE  
206

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## D. 专家名录

ESCONDIDO, CA 92025  
☎ Phone: (760) 755-7600  
Fax: (760) 755-7699  
📞 After Hours Phone: (760) 755-7600  
Provider Gender: Female  
NPI: 1982775144  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, NATIONAL NAVAL MED CTR, SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### FALLBROOK

#### CERTIFIED ACUPUNCTURIST

**CRAFT, KEVIN**  
Provider ID: 290943  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 1309 S MISSION RD  
FALLBROOK, CA 92028

☎ Phone: (760) 690-5900  
Fax: (760) 731-1063  
📞 After Hours Phone: (760) 690-5900  
Provider Gender: Male  
NPI: 1659745610  
📄 Provider English Spoken: Y  
📄 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: TU-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

**GUIDI, CASEY**  
Provider ID: 296010  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 1328 S MISSION RD  
FALLBROOK, CA 92028  
☎ Phone: (760) 451-4730  
Fax: (760) 457-4700  
📞 After Hours Phone: (760) 451-4730  
Provider Gender: Female  
NPI: 1013349919  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

#### CERTIFIED NURSE PRACTITIONER

**KELLEHER, BRIDGET**  
Provider ID: 298086  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 321 E ALVARADO ST  
FALLBROOK, CA 92028  
☎ Phone: (760) 723-6200  
Fax: (760) 414-3892  
📞 After Hours Phone: (760) 723-6200  
Provider Gender: Female  
NPI: 1245695006  
📄 Provider English Spoken: Y  
📄 Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SA 9AM-4PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **CERTIFIED NURSE PRACTITIONER**

**KELLEHER, BRIDGET**  
Provider ID: 299775  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
321 E ALVARADO ST  
FALLBROOK, CA 92028  
Phone: (760) 723-6200  
Fax: (760) 414-3892  
After Hours Phone: (760)  
723-6200  
Provider Gender: Female  
NPI: 1245695006  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR  
Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM  
Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **CERTIFIED NURSE PRACTITIONER**

**STOJANOVSKA, JOVANA**  
Provider ID: 301367  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1328 S MISSION RD  
FALLBROOK, CA 92028  
Phone: (760) 451-4720  
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: 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

### **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




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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Provider English Spoken: Y  
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

### **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

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## D. 专家名录

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

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


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## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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#### **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

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### **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

---


### **FAMILY PRACTICE**


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#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A


IPA: IHP of Southern Cal-PHP


### INTERNAL MEDICINE

#### RYAN, DANA

Provider ID: 298099

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 949 PALM AVE  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 429-3733  
Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

Provider Gender: Female  
NPI: 1780609990


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-8PM  
TU-W 8:30AM-5PM

TH 8:30AM-8PM

F 8:30AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


### REGISTERED PHYSICAL THERAPIST

#### CHENG, BRANDON

Provider ID: 304530

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 332-4200  
Fax: (613) 332-4220

 After Hours Phone: (619)  
332-4200

Provider Gender: Male  
NPI: 1336894724


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 7AM-7PM  
F 7AM-5PM

SA 8AM-1PM

 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### REGISTERED PHYSICAL THERAPIST

#### JIMENEZ, ANDREA

Provider ID: 299890

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

 Phone: (619) 482-3000  
Fax: (619) 332-4220

 After Hours Phone: (619)  
482-3000

Provider Gender: Female  
NPI: 1407440670


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### JIMENEZ, ANDREA

Provider ID: 301973

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

☎ Phone: (619) 482-3000

Fax: (619) 332-4220

🕒 After Hours Phone: (619) 482-3000

Provider Gender: Female

NPI: 1407440670

🗨 Provider English Spoken: Y

🗨 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **KARANDE, PRACHI**

Provider ID: 287101

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

☎ Phone: (619) 482-3000

Fax: (619) 482-3001

🕒 After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1699357525

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 7AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **NGUYEN, TIA**

Provider ID: 305015

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

☎ Phone: (619) 482-3000

Fax: (619) 332-4220

🕒 After Hours Phone: (619)  
482-3000

Provider Gender: Female

NPI: 1457136269

🗨 Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TH 7AM-7PM  
F 7AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **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

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## D. 专家名录

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 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **NOVENCIDO, ANDREW**

Provider ID: 286783

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

Phone: (619) 482-3000  
Fax: (619) 332-4220

After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST

#### **SPARKS, TODD**

Provider ID: 301109

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

600 PALM AVE STE 126  
IMPERIAL BEACH, CA  
91932

Phone: (619) 482-3000  
Fax: (619) 332-4220

After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1265481139

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M 7AM-7PM  
TU 7AM-0PM  
W-TH 7AM-7PM  
F 7AM-0PM

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

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## D. 专家名录

### **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**

#### **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

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

**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**

**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**

**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

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## D. 专家名录

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

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **FUNDINGSLAND, BRENT**

Provider ID: 280469

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1831166560

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SADDLEBACK

MEMORIAL MED CTR, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **HOSALKAR, HETAL**

Provider ID: 243370

Board Certified Specialty: No

UCSD MEDICAL GROUP

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1861556821

Provider English Spoken: Y

Provider Language(s)

Spoken: Farsi, Gujarati,  
Hindi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **HYLTON, DIANA**

Provider ID: 241736

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

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: 239608

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1720473044

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **NGUYEN, QUOC SY**

Provider ID: 242189

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1871911644

Provider English Spoken: Y

Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**

#### **OKAMOTO, VINCENT**

Provider ID: 245952

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952338709

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, ALVARADO

HOSPITAL LLC, SOUTHWEST  
HEALTHCARE INLAND

VALLEY HOSPITAL, UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **ANESTHESIOLOGY**


**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

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## D. 专家名录

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

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## D. 专家名录

IPA: UCSD Medical Group

---

### **ANESTHESIOLOGY**


---

#### **TZENG, ERIC**

Provider ID: 284578

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

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**


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#### **YODER, ANDREA**

Provider ID: 272805

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1629463104

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **ANESTHESIOLOGY**


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#### **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


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## D. 专家名录

American Sign Language (ASL):  Website: N/A

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**

#### **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

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **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: 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


 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

### **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: 304135  
Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1407401128

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A


IPA: UCSD Medical Group

### **CERTIFIED ACUPUNCTURIST**

#### **JULIAN, FIDES**

Provider ID: 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

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **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

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### 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 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

926-8273

Provider Gender: Female

NPI: 1770558967

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


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#### **CONNOR, CAROLINE**

Provider ID: 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

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### **CERTIFIED NURSE PRACTITIONER**


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#### **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

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### **CERTIFIED NURSE PRACTITIONER**


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#### **DAVIES, SUMMER**

Provider ID: 253691

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037

 Phone: (858) 249-6800  
Fax: (858) 657-6420

 After Hours Phone: (858)  
249-6800

Provider Gender: Female

NPI: 1679850671

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **DAVIES, SUMMER**

Provider ID: 238922

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 657-7600

After Hours Phone: (858)  
657-7600

Provider Gender: Female

NPI: 1679850671

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

#### **DE DIOS, SARAH JANE**

Provider ID: 300052

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS 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):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

---


### **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: 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**


---

#### **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**


---

#### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

American Sign Language (ASL): **GOMEZ, LESLIE**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 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

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### **CERTIFIED NURSE** **PRACTITIONER**

---

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

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### **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

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### **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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **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

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### **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

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### **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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **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**

---


#### **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*

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## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



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### **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: 299645  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1891061966  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

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### **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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

9300 CAMPUS 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

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### **CERTIFIED NURSE PRACTITIONER**

---

#### **MOHEBBI, ATHENA**

Provider ID: 282231

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1952627176

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **MULVEY, CAOILFHIONN**

Provider ID: 291420

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (800) 926-8372

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8372

Provider Gender: Female

NPI: 1184386864

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---

#### **NACOSTE, LAKEISHA**

Provider ID: 272935

Board Certified Specialty: No  
UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (858) 822-5210

After Hours Phone: (858)  
822-5210

Provider Gender: Female

NPI: 1194139634

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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#### **PAULSON, KERRY**

Provider ID: 201269

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

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

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### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **RALEIGH, DEBORAH**

Provider ID: 215016

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1689006876

Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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### **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

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## D. 专家名录


### 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

 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

 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

 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

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## D. 专家名录




 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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#### **TREJO, ANA**

Provider ID: 307671  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1033717194


 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group



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### CERTIFIED NURSE PRACTITIONER


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#### **TREJO, ANA**

Provider ID: 307673  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1033717194

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

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#### **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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### CERTIFIED NURSE PRACTITIONER

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#### **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

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### CERTIFIED NURSE

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## D. 专家名录

### **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

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## D. 专家名录

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1023194560

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**


---

#### **DOLLAND, STEVEN**

Provider ID: 280553

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982059044

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: KERN  
MEDICAL CENTER, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**


---

#### **FERRITER, STACY**

Provider ID: 265296

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1780725556

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**


---

#### **GARCIA, CALVIN**

Provider ID: 217366

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1427419944

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

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

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## D. 专家名录

### UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 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

#### **POLIKOWSKI, SAMANTHA**

Provider ID: 291443

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1194134114

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: KAISER

FOUNDATION HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### CERTIFIED REGISTERED NURSE ANESTHETIST

#### **RAMIREZ, NICOLE**

Provider ID: 291403

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1487213500

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

### PROVIDER

Website: N/A

IPA: UCSD Medical Group

### CERTIFIED REGISTERED NURSE ANESTHETIST

#### **SACKS, BRENT**

Provider ID: 278004

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1982133591

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### CERTIFIED REGISTERED NURSE MIDWIFE

#### **CHOI, NATHALIE**

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## D. 专家名录

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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录



<hr/> <b>CERTIFIED REGISTERED NURSE MIDWIFE</b> <hr/> <b>HIRSCH, JENNIFER</b> <i>Provider ID: 210057</i> <i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>  8910 VILLA LA JOLLA DR STE 200 LA JOLLA, CA 92037  <i>Phone: (858) 657-8745</i>  <i>After Hours Phone: (858) 657-8745</i> <i>Provider Gender: Female</i> <i>NPI: 1891752069</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-TU 8AM-5PM W 8AM-8PM TH-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i>	 9300 CAMPUS POINT DR LA JOLLA, CA 92037  <i>Phone: (858) 657-8745</i>  <i>After Hours Phone: (858) 657-8745</i> <i>Provider Gender: Female</i> <i>NPI: 1891752069</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i>	<i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i>
<hr/> <b>CERTIFIED REGISTERED NURSE MIDWIFE</b> <hr/> <b>HIRSCH, JENNIFER</b> <i>Provider ID: 210056</i> <i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>	<hr/> <b>CERTIFIED REGISTERED NURSE MIDWIFE</b> <hr/> <b>NATHAN, CARLY</b> <i>Provider ID: 301046</i> <i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>  9300 CAMPUS POINT DR LA JOLLA, CA 92037  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Female</i> <i>NPI: 1235670977</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i>	<hr/> <b>EMERGENCY MEDICINE</b> <hr/> <b>AMANN, CHRISTOPHER</b> <i>Provider ID: 270914</i> <i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>  9300 CAMPUS POINT DR LA JOLLA, CA 92037  <i>Phone: (858) 657-7000</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (858) 657-7000</i> <i>Provider Gender: Male</i> <i>NPI: 1134326895</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>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</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT</i>

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## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group








### EMERGENCY MEDICINE

#### AUSTIN, ANDREA

Provider ID: 269292  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1811289093  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, GROSSMONT  
HOSPITAL, Los Angeles  
General Medical Center,  
TEMECULA VALLEY HOSPITAL  
INC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### EMERGENCY MEDICINE

#### BAGBY, JESSICA




Provider ID: 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

#### 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

#### 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

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## D. 专家名录

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **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: 287429

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1427476597

Provider English Spoken: Y

Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### EMERGENCY MEDICINE

#### CHEN, ALICE

Provider ID: 287427

Board Certified 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

#### 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

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## D. 专家名录




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **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*




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### **EMERGENCY MEDICINE**

#### **HERNANDEZ, CRISTINA**

*Provider ID: 242545*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 *9300 CAMPUS POINT DR LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1164765046*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*







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### **EMERGENCY MEDICINE**

#### **HERNANDEZ, CRISTINA**

*Provider ID: 278988*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 *8910 VILLA LA JOLLA DR STE 100 LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*





*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1164765046*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **EMERGENCY MEDICINE**

#### **HOGUE, BRENNIA**

*Provider ID: 301710*  
*Board Certified Specialty: No UCSD MEDICAL GROUP*  
 *9300 CAMPUS POINT DR LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*  
*NPI: 1043705296*  
 *Provider English Spoken: Y*




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## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*  
 *Accessibility: CONTACT  
PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


### **EMERGENCY MEDICINE**

**HOGUE, BRENNIA**  
*Provider ID: 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**

**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: 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1598295925

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR, TRI CITY MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### EMERGENCY MEDICINE


---

#### KUTZ, CRAIG

Provider ID: 283844

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1598295925

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR, TRI CITY MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### EMERGENCY MEDICINE


---

#### LI, JINGHONG

Provider ID: 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

---


#### 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

---

#### LIOTTA, BENJAMIN

Provider ID: 283150

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**


#### **PARK, JAY**

Provider ID: 285608

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1366478372

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **QUENZER, FAITH**


Provider ID: 243284


Board Certified Specialty: No

UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1295112670

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation:

UNIVERSITY OF CALIFORNIA

IRVINE MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

 Hours: SU 8AM-8PM

M-F 8AM-5PM

SA 8AM-8PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

UCSD Medical Group

### **EMERGENCY MEDICINE**


#### **RUDOLF, FRANCES**


Provider ID: 240160

Board Certified Specialty: No

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

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## D. 专家名录

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: 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

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## D. 专家名录




*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**








#### **YOU, ALAN**

*Provider ID: 269938*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 *8910 VILLA LA JOLLA DR*  
*STE 100*  
*LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Male*  
*NPI: 1225425697*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **EMERGENCY MEDICINE**

#### **YOU, ALAN**

*Provider ID: 269937*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 *9300 CAMPUS POINT DR*  
*LA JOLLA, CA 92037*  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Male*  
*NPI: 1225425697*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON, UCSD MEDICAL*  
*CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **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*



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## D. 专家名录

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

#### **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)

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

926-8273  
Provider Gender: Male  
NPI: 1225234982  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **ENDOCRINOLOGY**

#### **METABOLISM DIABETES**

**SANTOS CAVAIOLA, TRICIA**  
Provider ID: 256092  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1518163799  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **FAMILY PRACTICE**

**CHEN, ALICE**  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

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  
📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (858) 657-8745  
📞 After Hours Phone: (858) 657-8745  
Provider Gender: Female  
NPI: 1750339446  
📄 Provider English Spoken: Y  
📄 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

#### **LUKACZ, EMILY**

Provider ID: 256954  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1750339446  
📄 Provider English Spoken: Y  
📄 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **GASTROENTEROLOGY**

#### **ANAND, GOBIND**

Provider ID: 272836  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (619) 543-2347  
Fax: (858) 657-7259  
📞 After Hours Phone: (619) 543-2347  
Provider Gender: Male  
NPI: 1861626814  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **GASTROENTEROLOGY**

#### **DAVE, SHRAVAN**

Provider ID: 270448  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 925-8273  
Fax: (888) 539-8781

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## D. 专家名录

☎ 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**

#### **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**

#### **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

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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 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: 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

#### **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

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## D. 专家名录

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):

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **GASTROENTEROLOGY**

**YOUSSEF, FADY**

Provider ID: 300025

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **GASTROENTEROLOGY**

**YOUSSEF, FADY**

Provider ID: 300023

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1265887723

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT PROVIDER

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

IPA: UCSD Medical Group

Min/Max Age: 0\None

American Sign Language (ASL): **HEMATOLOGY / ONCOLOGY**

### **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

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

#### **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



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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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: 202663

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273

Provider Gender: Male




NPI: 1982995809

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **HEYMAN, BENJAMIN**


Provider ID: 202664

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273

Provider Gender: Male




NPI: 1982995809

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### HEMATOLOGY / ONCOLOGY

#### **HEYMAN, BENJAMIN**

Provider ID: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 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

#### **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

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## D. 专家名录

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):

### **HEMATOLOGY / PATHOLOGY**

#### **WANG, HUAN YOU**

Provider ID: 275792  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1689633729  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **HEPATOLOGY**

#### **BARMAN, PRANAB**

Provider ID: 241954  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1023301991  
🗣 Provider English Spoken: Y  
🗣 Provider Language(s) Spoken: Hindi, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A

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## D. 专家名录

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

#### **RUBENSIK, 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### 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

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### 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

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### HOSPITALIST MD/DO

**SHINDO, YURI**

Provider ID: 284744

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1700271939

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### 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

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## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1356804926

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **INFECTIOUS DISEASE**

#### **KUPPALLI, KRUTIKA**

Provider ID: 301057

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1538346317

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, Stanford Health  
Care, STANFORD HEALTH

CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): Provider ID: 299947

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **INFECTIOUS DISEASE**

#### **KUPPALLI, KRUTIKA**

Provider ID: 301059

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1538346317

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, Stanford Health  
Care, STANFORD HEALTH

CARE TRI-VALLEY

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **INFECTIOUS DISEASE**

#### **RAMIREZSANCHEZ, CLAUDIA**

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS 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

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## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1982018545

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### **BORDIN-WOSK, TALYA**

Provider ID: 273984

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (760) 471-9186

Fax: (619) 543-8255

☎ After Hours Phone: (760) 471-9186

Provider Gender: Female

NPI: 1801184973

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): **CHENG, GEORGE**

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

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

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## D. 专家名录

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

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## D. 专家名录

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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **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

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## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **INTERNAL MEDICINE**

#### **NOKES, BRANDON**

Provider ID: 287581

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1487040051

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **INTERNAL MEDICINE**

#### **POTOK, OLIVIA**

Provider ID: 272707

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1073951323

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **INTERNAL MEDICINE**

#### **SEBASKY, MEGHAN**

Provider ID: 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**


#### **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

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## D. 专家名录

JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

**SMITH, CHELSEY**


Provider ID: 239921


Board Certified Specialty: No

UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
STE 2B


LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1013264506

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD


MEDICAL CTR


Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


**TAYLOR, DAVID**

Provider ID: 274470

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033572995

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes


Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


**WANG, ANGELA**

Provider ID: 259536

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1730133976

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS

GREEN HOSPITAL, SCRIPPS

MEMORIAL HOSPITAL, UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


**YADLAPATI, RENA**


Provider ID: 238587

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273


 After Hours Phone: (800)  
926-8273




Provider Gender: Female

NPI: 1548597784

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 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


### **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

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 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

#### **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

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## D. 专家名录


THORNTON, UCSD MEDICAL  
CTR, SOUTHWEST  
HEALTHCARE RANCHO  
SPRINGS HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group


### INTERVENTIONAL CARDIOLOGY


**AL KHIAMI, BELAL**

Provider ID: 275993

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

 Phone: (858) 657-8530

 After Hours Phone: (858)  
657-8530

Provider Gender: Male

NPI: 1861623506

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR, PIONEERS MEMORIAL  
HOSPITAL, EL CENTRO

REGIONAL MEDICAL CENTER,  
LOMA LINDA UNIVERSITY  
MED CTR MURRIETA,  
TEMECULA VALLEY HOSPITAL

INC


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### INTERVENTIONAL CARDIOLOGY

**CRUZ RODRIGUEZ, JOSE**


Provider ID: 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):


 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

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## D. 专家名录

 Website: N/A  
IPA: IHP of Southern Cal-PHP

---


### INTERVENTIONAL CARDIOLOGY

---

#### **GOVEA, ALAYN**

Provider ID: 300030  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9434 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1972997104  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
LAKEWOOD REGIONAL MED  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: UCSD Medical Group

---


### INTERVENTIONAL CARDIOLOGY

---

#### **TAUB, PAM**


Provider ID: 277681  
Board Certified Specialty: No

UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1346355161

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group


---


### INTERVENTIONAL CARDIOLOGY

---

#### **TAUB, PAM**

Provider ID: 277682  
Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)


926-8273


Provider Gender: Female  
NPI: 1346355161

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group


---


### INTERVENTIONAL CARDIOLOGY

---

#### **WETTERSTEN, NICHOLAS**


Provider ID: 210604  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1  
LA JOLLA, CA 92037

 Phone: (858) 657-8530  
Fax: (858) 657-8814

 After Hours Phone: (858)  
657-8530

Provider Gender: Male  
NPI: 1063701068




 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/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

### MATERNAL AND FETAL MEDICINE

#### **LAURENT, LOUISE**

Provider ID: 208639

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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,





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## D. 专家名录

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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N  
Website: N/A  
IPA: Rady Childrens Health Network

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE

#### **HIETALATI, SAMANTHA**

Provider ID: 294252

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800  
Fax: (858) 249-5839

 After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1245617489

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### NEONATAL / PERINATAL MEDICINE

#### **MARC-AURELE, KRISHELLE**

Provider ID: 206207

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 249-5800  
Fax: (858) 249-5839

 After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY  
MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network, UCSD Medical Group


### NEONATAL / PERINATAL MEDICINE

#### **MARC-AURELE, KRISHELLE**

Provider ID: 206209

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 9888 GENESEE AVE  
LA JOLLA, CA 92037

 Phone: (858) 626-4123  
Fax: (760) 633-7998

 After Hours Phone: (858)  
626-4123

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY  
MEDICAL CTR, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

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## D. 专家名录

Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

#### **MATOBA, NANA**

Provider ID: 299893

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **MATOBA, NANA**

Provider ID: 297977

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

9300 CAMPUS POINT DR  
STE 8

LA JOLLA, CA 92037

Phone: (858) 657-7000

Fax: (858) 249-5839

After Hours Phone: (858)  
657-7000

Provider Gender: Female

NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **MESTAN, KAREN**

Provider ID: 285931

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH

#### **NETWORK**

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (858) 249-5800

Fax: (858) 249-5839

After Hours Phone: (858)  
249-5800

Provider Gender: Female

NPI: 1942253356

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **NYMAN, KATHERINE**

Provider ID: 301824

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

9888 GENESEE AVE  
LA JOLLA, CA 92037

Phone: (858) 626-4123

Fax: (760) 633-7998

After Hours Phone: (858)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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

**RAMOS, CARLOS**  
Provider ID: 206062  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (858) 249-5800  
Fax: (619) 543-3812  
 After Hours Phone: (858)  
249-5800  
Provider Gender: Male  
NPI: 1205047545  
 Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, EL CENTRO  
REGIONAL MEDICAL CENTER,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

**SAJTI, ENIKO**  
Provider ID: 206170  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (858) 249-5800  
Fax: (858) 249-5839  
 After Hours Phone: (858)  
249-5800  
Provider Gender: Female

NPI: 1649433103  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

**SAUER, CHARLES**  
Provider ID: 303908  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
 9300 CAMPUS POINT DR  
FL 8  
LA JOLLA, CA 92037  
 Phone: (858) 249-5800  
Fax: (858) 249-5839  
 After Hours Phone: (858)  
249-5800  
Provider Gender: Male  
NPI: 1538388988  
 Provider English Spoken: Y  
Cultural Competency: N

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

*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*

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### **NEONATAL / PERINATAL MEDICINE**


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#### **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*

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### **NEUROLOGY**

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#### **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*

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### **NEUROLOGY**


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#### **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*

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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **NEUROLOGY**

#### **IRAGUIMADOZ, VICENTE**




*Provider ID: 246701*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (858) 657-8540*  
 *After Hours Phone: (858) 657-8540*  
*Provider Gender: Male*  
*NPI: 1053326710*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*




*IPA: UCSD Medical Group*

### **NEUROLOGY**

#### **LEE, DAVID**

*Provider ID: 246264*  
*Board Certified Specialty: No*  
*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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (888) 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

### NUCLEAR MEDICINE

#### SHARIF TABRIZI, AHMAD

Provider ID: 300029

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1053727313

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Providence  
St Mary Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### OBSTETRICS / GYNECOLOGY

#### BINDER, PRATIBHA

Provider ID: 273225

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174758031

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

### **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**

#### **GUPTA, PRATIMA**

Provider ID: 257546

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8910 VILLA LA JOLLA DR

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## D. 专家名录

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**

#### **HOANG, MAI**

Provider ID: 208295  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8910 VILLA LA JOLLA DR  
STE 200  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1104143593  
☑ Provider English Spoken: Y  
☑ Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT

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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **HOM-TEDLA, MARIANNE**

Provider ID: 242752  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1972047397

🗳️ Provider English Spoken: Y  
🗳️ Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL

CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **KLEIN, DAVID**

Provider ID: 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Provider Language(s)*  
*Spoken: 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**

#### **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

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## D. 专家名录

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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

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### **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: 284296  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9333 GENESEE AVE STE 340  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1295263861  
🗣 Provider English Spoken: Y  
Cultural Competency: N

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## D. 专家名录

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: 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: 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

 9300 CAMPUS 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

📞 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 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**

#### **MUNCADA, CAESAR**

Provider ID: 288724

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1790268100

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **SMITH, EMILY**

Provider ID: 258537

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (855) 543-0333

Fax: (858) 657-6873

After Hours Phone: (855)  
543-0333

Provider Gender: Female

NPI: 1417337403

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **SOROKIN, LISA**

Provider ID: 258362

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9350 CAMPUS POINT DR  
STE LLD

LA JOLLA, CA 92037

Phone: (858) 657-6879

Fax: (858) 657-6873

After Hours Phone: (858)  
657-6879

Provider Gender: Female

NPI: 1336445063

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

#### **BAXTER, SALLY**

Provider ID: 272787

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (888) 539-8781

After Hours Phone: (858)  
534-6290

Provider Gender: Female

NPI: 1912325184

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 7AM-5PM  
SA 7:45AM-2PM

Website: N/A

IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

#### **BEAZER, ALEX**

Provider ID: 272802

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1942662168

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### OPHTHALMOLOGY

#### 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

#### 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):

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

<p>N</p> <p> <b>Accessibility:</b> CONTACT PROVIDER</p> <p> <b>Hours:</b> M-F 8AM-5PM</p> <p> <b>Website:</b> N/A</p> <p>IPA: IHP of Southern Cal-PHP</p>	<p><i>Board Certified Specialty:</i> No</p> <p>UCSD MEDICAL GROUP</p> <p> 9415 CAMPUS POINT DR LA JOLLA, CA 92093</p> <p> <b>Phone:</b> (800) 926-8273</p> <p><b>Fax:</b> (888) 539-8781</p> <p> <b>After Hours Phone:</b> (800) 926-8273</p> <p><i>Provider Gender:</i> Female</p> <p>NPI: 1932605649</p> <p> <b>Provider English Spoken:</b> Y</p> <p><i>Cultural Competency:</i> N</p> <p><i>Hospital Affiliation:</i> SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0\None</p> <p><i>American Sign Language (ASL):</i></p>	<p>NPI: 1932605649</p> <p> <b>Provider English Spoken:</b> Y</p> <p><i>Cultural Competency:</i> N</p> <p><i>Hospital Affiliation:</i> SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0\None</p> <p><i>American Sign Language (ASL):</i></p>	
<hr/> <p><b>OPHTHALMOLOGY</b></p>	<hr/> <p><b>SCHONBACH, ETIENNE</b></p> <p><i>Provider ID:</i> 284432</p> <p><i>Board Certified Specialty:</i> No</p> <p>UCSD MEDICAL GROUP</p> <p> 9415 CAMPUS POINT DR LA JOLLA, CA 92093</p> <p> <b>Phone:</b> (800) 926-8273</p> <p><b>Fax:</b> (888) 539-8781</p> <p> <b>After Hours Phone:</b> (800) 926-8273</p> <p><i>Provider Gender:</i> Male</p> <p>NPI: 1073040580</p> <p> <b>Provider English Spoken:</b> Y</p> <p> <b>Provider Language(s) Spoken:</b> German</p> <p><i>Cultural Competency:</i> N</p> <p><i>Medi-Cal Open Panel:</i> Yes</p> <p><i>Min/Max Age:</i> 0\None</p> <p><i>American Sign Language (ASL):</i></p>	<p>N</p> <p> <b>Accessibility:</b> CONTACT PROVIDER</p> <p> <b>Website:</b> N/A</p> <p>IPA: IHP of Southern Cal-PHP, UCSD Medical Group</p>	<p>N</p> <p> <b>Accessibility:</b> CONTACT PROVIDER</p> <p> <b>Website:</b> N/A</p> <p>IPA: IHP of Southern Cal-PHP, UCSD Medical Group</p>
<hr/> <p><b>OPHTHALMOLOGY</b></p>	<hr/> <p><b>OPHTHALMOLOGY</b></p>	<hr/> <p><b>OPHTHALMOLOGY</b></p>	
<hr/> <p><b>SHEILS, CATHERINE</b></p> <p><i>Provider ID:</i> 299937</p> <p><i>Board Certified Specialty:</i> No</p> <p>UCSD MEDICAL GROUP</p> <p> 9300 CAMPUS POINT DR LA JOLLA, CA 92037</p> <p> <b>Phone:</b> (800) 926-8273</p> <p><b>Fax:</b> (888) 539-8781</p> <p> <b>After Hours Phone:</b> (800) 926-8273</p> <p><i>Provider Gender:</i> Female</p>	<hr/> <p><b>SHEILS, CATHERINE</b></p> <p><i>Provider ID:</i> 305309</p> <p><i>Board Certified Specialty:</i> No</p> <p>IHP OF SOUTHERN CAL-PHP</p> <p> 9834 GENESEE AVE STE 200 LA JOLLA, CA 92037</p> <p> <b>Phone:</b> (858) 457-3050</p> <p><b>Fax:</b> (858) 457-0851</p> <p> <b>After Hours Phone:</b> (858) 457-3050</p> <p><i>Provider Gender:</i> Female</p> <p>NPI: 1932605649</p> <p> <b>Provider English Spoken:</b> Y</p> <p><i>Cultural Competency:</i> N</p> <p><i>Hospital Affiliation:</i> SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL</p> <p><i>Medi-Cal Open Panel:</i> Yes</p>		

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## D. 专家名录

Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **OPHTHALMOLOGY**

#### **SONG, DELU**

Provider ID: 284425  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1437689536  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, Mandarin  
Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A




IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### **OPHTHALMOLOGY**

#### **TOPILOW, NICOLE**

Provider ID: 284348  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1215468376  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OPTOMETRIST**

#### **AOTO, KIM**



Provider ID: 296798  
Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP  
 9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037  
 Phone: (800) 898-2020  
Fax: (844) 897-3788

 After Hours Phone: (800)  
898-2020


Provider Gender: Female  
NPI: 1780935650

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M 9AM-5PM  
TU 8:30AM-4:30PM  
W 7:30AM-4:15PM  
TH 9:30AM-5PM  
F 8:30AM-4PM


 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **HOO, PAMELA**

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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (858) 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

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## D. 专家名录




MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC






### OPTOMETRIST

**VO, ANDREW**  
Provider ID: 304148  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1790291565  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A


IPA: UCSD Medical Group








### OPTOMETRIST

**VO, ANDREW**  
Provider ID: 201311  
Board Certified 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

**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

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OPTOMETRIST**


---

#### **YU, CAROL**

Provider ID: 301682

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1639697451

 Provider English Spoken: Y

 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

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### **OTOLARYNGOLOGY**


---

#### **BRUMUND, KEVIN**


Provider ID: 299636

Board Certified Specialty: No

UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**


---

#### **BRUMUND, KEVIN**

Provider ID: 299633

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**


---

#### **BRUMUND, KEVIN**

Provider ID: 299637

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033193669

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### OTOLARYNGOLOGY

**CALIFANO, JOSEPH**

Provider ID: 299463

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male


NPI: 1881652972


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

**CALIFANO, JOSEPH**


Provider ID: 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

**COFFEY, CHARLES**

Provider ID: 299584

Board Certified Specialty: No


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## D. 专家名录

### UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093


 Phone: (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


#### **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

#### **DECONDE, ADAM**

Provider ID: 299564


Board Certified Specialty: No


UCSD MEDICAL GROUP

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## D. 专家名录


 3855 HEALTH SCIENCES DR  
LA JOLLA, CA 92093

 Phone: (858) 657-8590

 After Hours Phone: (858) 657-8590

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY


**DECONDE, ADAM**

Provider ID: 299570

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY


**DECONDE, ADAM**


Provider ID: 299565

Board Certified Specialty: No

UCSD MEDICAL GROUP


 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 657-8590

 After Hours Phone: (858) 657-8590

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY


**DECONDE, ADAM**

Provider ID: 299566

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1588988919

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY


**FRIEDMAN, RICK**

Provider ID: 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

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## D. 专家名录

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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

**PROVIDER**  
 Website: N/A  
IPA: 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: 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: 299563

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1003825571

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**

---

#### **GILANI, SAPIDEH**

Provider ID: 299562

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

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## D. 专家名录




 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
Provider Gender: 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

**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: 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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


NPI: 1144583931

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### OTOLARYNGOLOGY

#### **GREENE, JACQUELINE**

Provider ID: 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: 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

#### **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: 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### **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**


#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

CTR

Medi-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: 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: 299447

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: 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: 299448*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

📍 *9300 CAMPUS POINT DR  
LA JOLLA, CA 92037*

☎ *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1780860536*

☑ *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation:*

*CHILDRENS HOSP OF LOS*

*ANGELES, PIH HEALTH*

*HOSPITAL - WHITTIER, UCSD*

*LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL*

*CTR, RADY CHILDRENS*

*HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🌐 *Website: N/A*

*IPA: Rady Childrens Health*

*Network, UCSD Medical Group*

---

### OTOLARYNGOLOGY

#### **KARI, ELINA**

*Provider ID: 299442*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

📍 *9350 CAMPUS POINT DR  
LA JOLLA, CA 92037*

☎ *Phone: (858) 857-8590*

☎ *After Hours Phone: (858) 857-8590*

*Provider Gender: Female*

*NPI: 1780860536*

☑ *Provider English Spoken: Y*

*Cultural Competency: N*

*Hospital Affiliation:*

*CHILDRENS HOSP OF LOS*

*ANGELES, PIH HEALTH*

*HOSPITAL - WHITTIER, UCSD*

*LA JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL*

*CTR, RADY CHILDRENS*

*HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health*

*Network, UCSD Medical Group*

---

### OTOLARYNGOLOGY

#### **KARI, ELINA**

*Provider ID: 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*

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## D. 专家名录

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

**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: 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: 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: 299483

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273  
Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 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: 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: 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: 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **OTOLARYNGOLOGY**


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#### **NGUYEN, QUYEN**

*Provider ID: 299609*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *9300 CAMPUS POINT DR  
LA JOLLA, CA 92037*

 *Phone: (800) 926-8273*


*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1477524452*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, SCRIPPS*


*GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **OTOLARYNGOLOGY**


---


#### **NGUYEN, QUYEN**

*Provider ID: 299604*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*


 *9350 CAMPUS POINT DR  
LA JOLLA, CA 92037*

 *Phone: (858) 657-8590*

 *After Hours Phone: (858)  
657-8590*

*Provider Gender: Female*

*NPI: 1477524452*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, SCRIPPS*

*GREEN HOSPITAL*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

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### **OTOLARYNGOLOGY**


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#### **NGUYEN, QUYEN**

*Provider ID: 299605*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *9400 CAMPUS POINT DR  
LA JOLLA, CA 92093*

 *Phone: (800) 926-8273*


*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1477524452*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Vietnamese*

*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, SCRIPPS*

*GREEN HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **OTOLARYNGOLOGY**

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#### **NGUYEN, QUYEN**

*Provider ID: 299608*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 *3855 HEALTH SCIENCES  
DR*

*LA JOLLA, CA 92093*

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1477524452*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Vietnamese*



*Cultural Competency: N*

*Hospital Affiliation: UCSD*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

MEDICAL CTR, 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**

**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, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

**VAHABZADEH-HAGH, ANDREW**

Provider ID: 299510

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: 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: 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### UCSD MEDICAL GROUP

 9300 CAMPUS 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: 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: 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: 299616

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
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: 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

### 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

### 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):  Website: N/A

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **OTOLARYNGOLOGY**


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#### **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

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### **PATHOLOGY ANATOMIC**


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#### **FADARE, OLUWOLE**

Provider ID: 275706

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1619955804

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **PATHOLOGY ANATOMIC**


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#### **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**


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#### **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

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## D. 专家名录



 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/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*  
 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

<p align="center"><b><u>PATHOLOGY ANATOMIC</u></b> <b><u>CLINICAL</u></b></p>	<p align="center"><b><u>PATHOLOGY ANATOMIC</u></b> <b><u>CLINICAL</u></b></p>	<p align="center"><b><u>PATHOLOGY ANATOMIC</u></b> <b><u>CLINICAL</u></b></p>
<p><b>BUI, JACK</b>            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</p>	<p>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</p>	<p>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</p>
<p align="center"><b><u>PATHOLOGY ANATOMIC</u></b> <b><u>CLINICAL</u></b></p> <p><b>DON, MICHELLE</b>            Provider ID: 275816            Board Certified Specialty: No</p>	<p align="center"><b><u>PATHOLOGY ANATOMIC</u></b> <b><u>CLINICAL</u></b></p> <p><b>DON, MICHELLE</b>            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</p>	<p><b>ELKIND, JAE</b>            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</p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### PATHOLOGY ANATOMIC CLINICAL


---


**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


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**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

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## D. 专家名录

☎ 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

### 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

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## D. 专家名录

**PROVIDER**  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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### **PATHOLOGY ANATOMIC CLINICAL**


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#### **ZHANG, HAIYAN**

Provider ID: 203176

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN

HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL): HOSPITAL

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **PATHOLOGY ANATOMIC CLINICAL**


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#### **ZHANG, HAIYAN**

Provider ID: 275841

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1457617110

Provider English Spoken: Y

Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

MEMORIAL HOSPITAL,

SCRIPPS MERCY HOSPITAL,

SCRIPPS MERCY HOSPITAL

CHULA VISTA, SCRIPPS

MEMORIAL HOSPITAL

ENCINITAS, SCRIPPS GREEN

HOSPITAL, SCRIPPS GREEN


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **PATHOLOGY CLINICAL**


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#### **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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。











## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*



### **PATHOLOGY CLINICAL**

#### **LE DZUNG, THE**




*Provider ID: 275733*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1770526931*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **PHYSICIANS ASSISTANT**

#### **AINSWORTH, DELISSA**

*Provider ID: 243366*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 8910 VILLA LA JOLLA DR  
STE 100  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1750734893*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*


### **PHYSICIANS ASSISTANT**

#### **ALBRIGHT, KELSEY**



*Provider ID: 284764*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*




*Provider Gender: Female*  
*NPI: 1235653148*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **PHYSICIANS ASSISTANT**

#### **ALLERS, JENNA**

*Provider ID: 301037*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Female*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 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: 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

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/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**




#### **COOKISH, DAVID**

Provider ID: 286591  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1215338884

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

---

### **PHYSICIANS ASSISTANT**


#### **CRIFE, TAYLOR**

Provider ID: 210983




Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1659827087

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

---

### **PHYSICIANS ASSISTANT**

#### **DEMASCO, MICHAEL**

Provider ID: 278969  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: 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

#### 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

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## D. 专家名录

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: 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: 298432  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1114459765

☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

**HUNTER, JACOB**  
Provider ID: 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: 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):

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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**


#### **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**


#### **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**

#### **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**

#### **LIN, JOYCE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 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**

#### **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: 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

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## D. 专家名录

### 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


#### 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

#### 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

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## D. 专家名录

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): IPA: UCSD Medical Group

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)  
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**

**PERREAU, 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

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## D. 专家名录

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 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/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: 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**

#### **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**

#### **ROBERTS, AUDREY**




*Provider ID: 253255*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 *Phone: (858) 657-7876*  
 *After Hours Phone: (858) 657-7876*  
*Provider Gender: Female*  
*NPI: 1265960256*



 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

---

### **PHYSICIANS ASSISTANT**


#### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group

---


### **PHYSICIANS ASSISTANT**

---

#### **SAIKHON, TALIA**



Provider ID: 293439  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273


Provider Gender: Female  
NPI: 1699263905


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: UCSD Medical Group

---



### **PHYSICIANS ASSISTANT**

---

#### **SANCHEZ, MICHAEL**

Provider ID: 206907  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR  
STE 110

LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1184135006


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group

---


### **PHYSICIANS ASSISTANT**

---

#### **SCHWARTZEL, KEVIN**


Provider ID: 214276  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8910 VILLA LA JOLLA DR  
STE 100

LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1104277847

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 8AM-8PM  
M-F 8AM-5PM  
SA 8AM-8PM

 Website: N/A  
IPA: UCSD Medical Group

---



### **PHYSICIANS ASSISTANT**

---


#### **SHAUL, SHERA**

Provider ID: 247976  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8373  
 After Hours Phone: (800)  
926-8373

Provider Gender: Female  
NPI: 1336659507

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group


### **PHYSICIANS ASSISTANT**




#### **SHAUL, SHERA**

Provider ID: 247975  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1336659507

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **PHYSICIANS ASSISTANT**



#### **SPEH, BRIAN**

Provider ID: 305010  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1124593926

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group


### **PHYSICIANS ASSISTANT**

#### **TESFAI, HELEN**




Provider ID: 277072  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (800) 926-8273  
 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1942724042

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON



Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**


#### **WAHLIN, TAMARA**



Provider ID: 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

LA JOLLA, CA 92093  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

🗉 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### **WAHLIN, TAMARA**

Provider ID: 299602

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1083823322

🗉 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### **WEIR, JACQUELINE**

Provider ID: 278202

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

Fax: (800) 539-8781

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1932494499

🗉 Provider English Spoken: Y

🗉 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### **BAILIS, JESSICA**

Provider ID: 300043

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1760739049

🗉 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### **BOOTH, CHRISTOPHER**

Provider ID: 209117

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

☎ Phone: (800) 926-8273

🕒 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1568893162

🗉 Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录


*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **PSYCHOLOGIST**


#### **BOOTH, CHRISTOPHER**

*Provider ID: 209118*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1568893162*


 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **PSYCHOLOGIST**

#### **BOUTELLE, KERRI**

*Provider ID: 302876*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 3344 N TORREY PINES CT  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1780620906*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **PSYCHOLOGIST**


#### **BOUTELLE, KERRI**

*Provider ID: 240034*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1780620906*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR*

*Medi-Cal Open Panel: Yes*

*Min/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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST


---

#### CHESHER, NICHOLAS

Provider ID: 273812

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1124539697

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


#### CRANDAL, BRENT

Provider ID: 291463

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8372

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8372

Provider Gender: Male

NPI: 1588739452

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


#### DUARTE, KRISTEN

Provider ID: 255479

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST


---


#### DUARTE, KRISTEN

Provider ID: 255480

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1093119364

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


#### 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

---


#### 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: 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

---


#### 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

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST


---

#### **LINKE, SARAH**

Provider ID: 273640

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8939 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1487026415

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST


---

#### **MAGINOT-CHESHER, TAMARA**


Provider ID: 273224

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 534-7792

Fax: (619) 471-9017

 After Hours Phone: (858)  
534-7792

Provider Gender: Female

NPI: 1043441165

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, RADY


CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---

#### **MENDEZ, ANDRES**


Provider ID: 279058

Board Certified Specialty: No

UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1841482692

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PSYCHOLOGIST

---


#### **PELHAM, WILLIAM**

Provider ID: 307681

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 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

♿ 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

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## D. 专家名录

 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

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## D. 专家名录

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **PULMONARY DISEASES**







#### **PEARCE, ALEX**

Provider ID: 300054  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1265896856  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **BERMAN, ZACHARY**




Provider ID: 269319  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR

LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1033521190  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**






#### **BRANCH, CODY**

Provider ID: 283676  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1851770622  
 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **CARSWELL, AIMEE**

Provider ID: 303056  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037  
 Phone: (858) 554-1212  
Fax: (858) 795-1195  
 After Hours Phone: (858)  
554-1212  
Provider Gender: Female  
NPI: 1619156635  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
EISENHOWER MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

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## D. 专家名录

### PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

#### 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

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### RADIOLOGY DIAGNOSTIC

#### **GRISSOM, MURRAY**

Provider ID: 271568

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1720465396

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, Stanford Health

Care, STANFORD HEALTH

CARE TRI-VALLEY


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

#### **PROVIDER**

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

#### **HANNSUN, GEMMY**

Provider ID: 282790

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1992120026

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Khmer, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### RADIOLOGY DIAGNOSTIC


#### **HORKY, LAURA**

Provider ID: 241854

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1598967812

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### RADIOLOGY DIAGNOSTIC


#### **HORKY, LAURA**

Provider ID: 241855

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

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## D. 专家名录

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):

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **JAZBEH, SAMMER**

Provider ID: 271128

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037


 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770825457

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, PROVIDENCE

LITTLE CO OF MARY MED CTR

TORRANCE, PROVIDENCE

LITTLE CO OF MARY MED CTR

SAN PEDRO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **KHURANA, AMAN**

Provider ID: 307767

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1427496710


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **KONDILI, DHIMITER**


Provider ID: 283144

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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## D. 专家名录

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1699125450

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:


EISENHOWER MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **MARKS, ROBERT**

Provider ID: 300066

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952389934

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: ST MARY  
MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **RITCHIE, DAVID**

Provider ID: 300033

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1407201916

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**


#### **SADAT, SAYED**

Provider ID: 299967

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1679000806

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**


#### **SCHULTZ, HEATHER**

Provider ID: 240343

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1871910810

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

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## D. 专家名录

---

JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **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):

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## D. 专家名录

<p>N  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p><i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>  9300 CAMPUS POINT DR LA JOLLA, CA 92037  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Male</i> <i>NPI: 1306112057</i>  <i>Provider English Spoken: Y</i>  <i>Provider Language(s) Spoken: Spanish</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<p> <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Male</i> <i>NPI: 1285165183</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>
<hr/> <p><b>RADIOLOGY DIAGNOSTIC</b> <b>TADDONIO, MICHAEL</b> <i>Provider ID: 240406</i> <i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>  9300 CAMPUS POINT DR LA JOLLA, CA 92037  <i>Phone: (800) 926-8273</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Male</i> <i>NPI: 1386987261</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Hours: M-F 8AM-5PM</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>	<hr/> <p><b>RADIOLOGY DIAGNOSTIC</b> <b>UNSDORFER, KYLE</b> <i>Provider ID: 300036</i> <i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>  9300 CAMPUS POINT DR LA JOLLA, CA 92037  <i>Phone: (800) 926-8273</i> <i>Fax: (888) 539-8781</i></p>	<hr/> <p><b>RADIOLOGY DIAGNOSTIC</b> <b>VAHDAT, NOUSHIN</b> <i>Provider ID: 300069</i> <i>Board Certified Specialty: No</i> <b>UCSD MEDICAL GROUP</b>  9300 CAMPUS POINT DR LA JOLLA, CA 92037  <i>Phone: (800) 926-8273</i>  <i>After Hours Phone: (800) 926-8273</i> <i>Provider Gender: Female</i> <i>NPI: 1396700852</i>  <i>Provider English Spoken: Y</i> <i>Cultural Competency: N</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\None</i> <i>American Sign Language (ASL): N</i>  <i>Accessibility: CONTACT PROVIDER</i>  <i>Website: N/A</i> <i>IPA: UCSD Medical Group</i></p>

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## D. 专家名录

<hr/> <b><u>RADIOLOGY DIAGNOSTIC</u></b> <hr/> <b>YORK, VINCENT</b> 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	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 Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Website: N/A IPA: UCSD Medical Group	Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
<hr/> <b><u>RADIOLOGY DIAGNOSTIC</u></b> <hr/> <b>ZAPALA, MATTHEW</b> 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	<hr/> <b><u>REGISTERED DIETITIAN / NUTRITIONIST</u></b> <hr/> <b>SIEVERING, DENISE</b> 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	<hr/> <b><u>REGISTERED PHYSICAL THERAPIST</u></b> <hr/> <b>BERGERON, PATRICK</b> 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **REGISTERED PHYSICAL THERAPIST**

#### **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**

#### **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

### **REGISTERED PHYSICAL THERAPIST**

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## D. 专家名录

### 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

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## D. 专家名录



 Website: N/A  
IPA: UCSD Medical Group




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### 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

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### 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

Provider Gender: Male

NPI: 1568938413

 Provider English Spoken: Y  
Cultural Competency: N




Hospital Affiliation: UCSD

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## D. 专家名录

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/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: 288939  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 3855 HEALTH SCIENCES  
DR  
LA JOLLA, CA 92093  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1164979837

🗣️ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **SPEECH PATHOLOGIST**

**SCHIEDERMAYER, BENJAMIN**

Provider ID: 288938

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

📞 Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1164979837

🗣️ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **SPEECH PATHOLOGIST**

**UNGER, LINDSEY**

Provider ID: 265338

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9350 CAMPUS POINT DR  
LA JOLLA, CA 92037

📞 Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1972936813

🗣️ Provider English Spoken: Y

🗣️ Provider Language(s)  
Spoken: Sign Language

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **SURGERY COLON SURGERY**

**LIU, SHANGLEI**

Provider ID: 273364

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

📞 Phone: (800) 926-8273

Fax: (888) 539-8781

📞 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1043558653

🗣️ Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female

NPI: 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**

#### **POTENZA, BRUCE**



Provider ID: 277299

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037




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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录






 Phone: (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: 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**

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<b>SURGERY GENERAL</b>	
<p><b>ARMANI, AVA</b>                      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</p>	<p>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</p>
<p><b>SURGERY GENERAL</b></p> <p><b>CLARY, BRYAN</b>                      Provider ID: 202568</p>	<p><b>SURGERY GENERAL</b></p> <p><b>HORGAN, SANTIAGO</b>                      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</p>
	<p>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</p>
	<p><b>SURGERY GENERAL</b></p> <p><b>JACOBSEN, GARTH</b>                      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</p>

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## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL


**SANTORELLI, JARRETT**

Provider ID: 272304

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033529201

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

#### VASCULAR


**BARLEBEN, ANDREW**


Provider ID: 275371

Board Certified Specialty: Yes

UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

#### VASCULAR

**BARLEBEN, ANDREW**


Provider ID: 275373

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9434 MEDICAL CENTER DR  
FL 1

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1497936900

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### SURGERY GENERAL

#### VASCULAR


**GAFFEY, ANN**

Provider ID: 287012

Board Certified Specialty: No

UCSD MEDICAL GROUP

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

926-8273  
Provider Gender: Female  
NPI: 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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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):

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **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

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### **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

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### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### UCSD MEDICAL GROUP

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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Provider ID: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **SURGERY ORTHOPEDIC**

**CHOI, JIHOON**

Provider ID: 284786

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

Fax: (888) 539-8181

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285097741

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**


**FLINT, JAMES**

Provider ID: 203177

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1629239140

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

**GOEB, YANNICK**

Provider ID: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: German, Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

#### **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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

CTR


Medi-Cal Open Panel: Yes

Min/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: 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 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

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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*



 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*




### **SURGERY 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**




#### **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**

#### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **SURGERY 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: 291382

Board Certified Specialty: No

UCSD MEDICAL GROUP

3855 HEALTH SCIENCES  
DR

LA JOLLA, CA 92093

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **SURGERY THORACIC**

#### **ZANDER, ASHLEY**

Provider ID: 291381

Board Certified Specialty: No

UCSD MEDICAL GROUP

9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1780940031

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **UROLOGY**

#### **CRAWFORD, ELWARD**

Provider ID: 244131

Board Certified Specialty: No

UCSD MEDICAL GROUP

9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 657-7876

Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (858) 657-7876

Provider Gender: Male

NPI: 1902814379

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### UROLOGY

#### HSIEH, TUNG CHIN

Provider ID: 294878

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (858) 249-3534

☎ After Hours Phone: (858)  
249-3534

Provider Gender: Male

NPI: 1073758652

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### UROLOGY

#### KATZ, JONATHAN

Provider ID: 299917

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9400 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952756207

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### UROLOGY

#### WANG, LUKE

Provider ID: 299934

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 9400 CAMPUS POINT DR

LA JOLLA, CA 92093

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1033630173

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### LA MESA

### CARDIOVASCULAR DISEASE

#### KOTHA, PURUSHOTHAM

Provider ID: 32053

Board Certified Specialty: Yes

PURUSHOTHAM AND AKTHER  
KOTHA MD INC

📍 8860 CENTER DR STE 400  
LA MESA, CA 91942

☎ Phone: (619) 229-1995

Fax: (619) 229-1109

☎ After Hours Phone: (619)  
229-1995

Provider Gender: Male



NPI: 1093730814

☑ Provider English Spoken: Y  
☑ Provider Language(s)





Spoken: Hindi, Spanish,  
Telugu



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## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: ALVARADO HOSPITAL LLC, GROSSMONT HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC*




### **CARDIOVASCULAR DISEASE**

**REDDY, REDDIWANDLA**  
*Provider ID: 265393*  
*Board Certified Specialty: No*  
*BLUE SHIELD PROMISE HEALTH PLAN DIRECT*  
 5565 GROSSMONT CENTER DR STE 202 LA MESA, CA 91942  
 *Phone: (619) 461-6130*  
*Fax: (619) 461-3108*  
 *After Hours Phone: (619) 461-6130*  
*Provider Gender: Male*  
*NPI: 1710996384*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Kannada, Spanish, Telugu*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, ALVARADO HOSPITAL LLC*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8:30AM-5PM*  
 *Website: N/A*  
*IPA: BLUE SHIELD PROMISE HEALTH PLAN DIRECT*





### **CARDIOVASCULAR DISEASE**

**SHEREV, DIMITRI**  
*Provider ID: 290704*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 8851 CENTER DR STE 304 LA MESA, CA 91942  
 *Phone: (619) 867-0557*  
*Fax: (619) 867-0558*  
 *After Hours Phone: (619) 867-0557*  
*Provider Gender: Male*  
*NPI: 1154323996*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Bulgarian, Russian, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, GROSSMONT HOSPITAL, SHARP MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, ALVARADO HOSPITAL LLC, SHARP CHULA VISTA MED CTR, TRI CITY*

*MEDICAL CTR, TRI CITY MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, Sharp Grossmont Hospital, 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):*

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## D. 专家名录

N





 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **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*


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### **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*

---

### **EMERGENCY MEDICINE**



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#### **QUINONES-PEREZ, BIANCA**

*Provider ID: 206948*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 5565 GROSSMONT CENTER DR STE 2 STE 2  
LA MESA, CA 91942  
 *Phone: (619) 713-5375*  
*Fax: (619) 713-5379*

 *After Hours Phone: (619) 713-5375*


*Provider Gender: Female*  
*NPI: 1124360565*


 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL):*

N  
 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 1PM-10PM*  
*M-F 4PM-10PM*  
*SA 1PM-10PM*

 *Website: N/A*  
*IPA: Rady Childrens Health Network*

---

### **HEARING AID DEALER /** **SUPPLIER**

---

#### **ANDERSON, ELAINE**

*Provider ID: 268693*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 5565 GROSSMONT CENTER DR  
LA MESA, CA 91942  
 *Phone: (619) 589-5414*  
*Fax: (619) 589-7391*  
 *After Hours Phone: (619) 589-5414*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female

NPI: 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

### INTERVENTIONAL CARDIOLOGY

#### **TAGHIZADEH, BEHZAD**

Provider ID: 269161

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

8851 CENTER DR STE 405  
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)  
582-2404

Provider Gender: Male

NPI: 1275514986

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **YELLEN, LAURENCE**

Provider ID: 269173

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

8851 CENTER DR STE 405  
LA MESA, CA 91942

Phone: (619) 582-2404

Fax: (619) 582-2915

After Hours Phone: (619)  
582-2404

Provider Gender: Male

NPI: 1477680551

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, Spanish

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC,

USC Arcadia Hospital

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### MATERNAL AND FETAL MEDICINE

#### **ADAMI, REBECCA**

Provider ID: 272676

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

5555 GROSSMONT  
CENTER DR

LA MESA, CA 91942

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1992149447

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SHARP MEMORIAL  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER























Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

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## D. 专家名录

<b>MATERNAL AND FETAL MEDICINE</b>	<b>MATERNAL AND FETAL MEDICINE</b>	<b>MEDICINE</b>
<b>MCCULLOUGH, DEIRDRE</b> 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	<b>MELBER, DORA</b> 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	<b>REIMERS, REBECCA</b> 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
	<b>MATERNAL AND FETAL MEDICINE</b>	<b>MATERNAL AND FETAL MEDICINE</b>
		<b>REIMERS, REBECCA</b> Provider ID: 294654 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

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## D. 专家名录



### 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

#### 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

### MATERNAL AND FETAL MEDICINE

#### WILLIAMS, KRISTIN







Provider ID: 277384  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 5555 GROSSMONT CENTER DR  
LA MESA, CA 91942

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## D. 专家名录

 Phone: (858) 966-6710  
Fax: (858) 966-6711  
 After Hours Phone: (858) 966-6710  
Provider Gender: Female  
NPI: 1992847131  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network








### NEUROLOGY

**MOHAMMAD, AHMADSHAH**  
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

**HAIGHT, BRUCE**  
Provider ID: 288660  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 7339 EL CAJON BLVD STE J AND K LA MESA, CA 91942  
 Phone: (619) 722-8460  
Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460  
Provider Gender: Male  
NPI: 1427029628  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### OPHTHALMOLOGY

**HAIGHT, BRUCE**  
Provider ID: 269112  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 5565 GROSSMONT CENTER DR BLDG 3 STE 551 LA MESA, CA 91942  
 Phone: (619) 465-2020  
Fax: (619) 698-1189  
 After Hours Phone: (619) 465-2020  
Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1427029628

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-4PM

TU-W 8:30AM-4PM

TH 8AM-4PM

F 8AM-0PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


### **OPHTHALMOLOGY**

#### **HAIGHT, BRUCE**

Provider ID: 295984

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 5565 GROSSMONT  
CENTER DR STE 2-3  
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)  
465-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8:30AM-4PM  
F 8AM-0PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**


#### **HAIGHT, BRUCE**

Provider ID: 305885

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 5565 GROSSMONT  
CENTER DR BLDG 3 STE  
551

LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)  
465-2020

Provider Gender: Male

NPI: 1427029628

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-4PM

TU-W 8:30AM-4PM

TH 8AM-4PM

F 8AM-0PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP


### **OPHTHALMOLOGY**


#### **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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

N  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*




N  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*

N  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-4:30PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP, UCSD Medical Group*







### OPHTHALMOLOGY

**HUDSON, HENRY**  
*Provider ID: 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: 6\99*  
*American Sign Language (ASL): American Sign Language (ASL):*

### 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*

### OPTOMETRIST

**AOTO, KIM**  
*Provider ID: 288652*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 7339 EL CAJON BLVD STE J AND K  
 LA MESA, CA 91942  
 *Phone: (619) 722-8460*  
*Fax: (619) 722-8465*  
 *After Hours Phone: (619) 722-8460*  
*Provider Gender: Female*  
*NPI: 1780935650*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Vietnamese*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*

### OTOLARYNGOLOGY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **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

### OTOLARYNGOLOGY

#### **SAEZ, NEIL**

Provider ID: 302431

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

5565 GROSSMONT  
CENTER DR BLDG 3 STE  
101

LA MESA, CA 91942

Phone: (619) 464-3353

Fax: (619) 464-6720

After Hours Phone: (619)  
464-3353

Provider Gender: Male

NPI: 1518456508

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **GROSS, MATTHEW**

Provider ID: 297177

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

5565 GROSSMONT  
CENTER DR STE 2 STE 2  
LA MESA, CA 91942

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)  
713-5375

Provider Gender: Male

NPI: 1942223664

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: SU 1PM-10PM  
M-F 4PM-10PM

SA 1PM-10PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **PARKER, SHERINE**

Provider ID: 205786

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

5565 GROSSMONT  
CENTER DR STE 2  
LA MESA, CA 91942

Phone: (619) 713-5375

Fax: (619) 713-5379

After Hours Phone: (619)  
713-5375

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Female  
NPI: 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

#### **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

#### **FERRARA, SAMANTHA**

Provider ID: 309977  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
📍 5565 GROSSMONT  
CENTER DR STE 444  
LA MESA, CA 91942  
☎ Phone: (619) 698-0606  
Fax: (619) 698-0609  
🕒 After Hours Phone: (619)  
698-0606  
Provider Gender: Female  
NPI: 1437822434  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

EISENHOWER MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F  
8:30AM-5:30PM

 Website: N/A

IPA: Community Care IPA LLC


### PHYSICIANS ASSISTANT


**HINKLE, CORINNE**

Provider ID: 309954

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC


 5565 GROSSMONT  
CENTER DR STE 444  
LA MESA, CA 91942

 Phone: (619) 698-0606

 After Hours Phone: (619)  
698-0606

Provider Gender: Female

NPI: 1508451949

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: Valleywise  
Health Medical Center


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### PHYSICIANS ASSISTANT

**RAYMOND, ALAIN**


Provider ID: 269057

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 8851 CENTER DR STE 505  
LA MESA, CA 91942


 Phone: (619) 461-3880


Fax: (619) 461-3895

 After Hours Phone: (619)  
461-3880

Provider Gender: Male

NPI: 1164729125

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French, 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

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


### PODIATRIST

**CAINE, SAMUEL**

Provider ID: 308638

Board Certified 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

Grossmont Hospital, SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SCRIPPS MERCY  
 HOSPITAL, SHARP MEMORIAL  
 HOSPITAL, SHARP CHULA  
 VISTA MED CTR, SHARP  
 CORONADO HOSP AND  
 HEALTHCARE CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### PODIATRIST

#### CAINE, SAMUEL


Provider ID: 308213  
 Board Certified Specialty: No  
 COMMUNITY CARE IPA LLC  
 5565 GROSSMONT  
 CENTER DR STE 510  
 LA MESA, CA 91942  
 Phone: (619) 303-7130  
 Fax: (619) 303-7150  
 After Hours Phone: (619)  
 303-7130  
 Provider Gender: Male  
 NPI: 1396230298  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: Sharp

Grossmont Hospital, SCRIPPS  
 MERCY HOSPITAL CHULA  
 VISTA, SCRIPPS MERCY  
 HOSPITAL, SHARP MEMORIAL  
 HOSPITAL, SHARP CHULA  
 VISTA MED CTR, SHARP  
 CORONADO HOSP AND  
 HEALTHCARE CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
 IHP of Southern Cal-PHP

### 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,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Sharp Grossmont Hospital


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC


### **RADIATION ONCOLOGY**

**VOLPP, PAUL**

Provider ID: 221104

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 5555 GROSSMONT  
CENTER DR  
LA MESA, CA 91942

 Phone: (619) 740-4500

Fax: (619) 740-8499

 After Hours Phone: (619)  
740-4500

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,

GROSSMONT HOSPITAL,

PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### **RHEUMATOLOGY**


**KOTHA, ROSHAN**

Provider ID: 63454

Board Certified Specialty: No

PURUSHOTHAM AND AKTHER  
KOTHA MD INC

 8860 CENTER DR STE 400  
LA MESA, CA 91942


 Phone: (619) 229-1995


Fax: (619) 229-1109

 After Hours Phone: (619)  
229-1995

Provider Gender: Female

NPI: 1417117839

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Hindi, Spanish,  
Telugu

Cultural Competency: N

Hospital Affiliation:

GROSSMONT HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8:30AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### **SURGERY ORTHOPEDIC**


**BALLARD, BROOKE**

Provider ID: 262205

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

 8860 CENTER DR STE 350  
LA MESA, CA 91942

 Phone: (619) 286-9480

Fax: (619) 286-4568

 After Hours Phone: (619)  
286-9480

Provider Gender: Female

NPI: 1841447950

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: ALVARADO  
HOSPITAL LLC, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Imperial Health Holdings

Medical Group-SD

### **LAKE ELSINORE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

### **OBSTETRICS / GYNECOLOGY**

#### **FRANCIS, LARRY**

Provider ID: 290293

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

30195 FRASER DR

LAKE ELSINORE, CA 92530

Phone: (951) 252-2720

Fax: (760) 414-3892

After Hours Phone: (951)  
252-2720

Provider Gender: Male

NPI: 1215008552

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SHARP MEMORIAL HOSPITAL,

POMONA VALLEY HOSP MED

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **GEE, JENNIFER**

Provider ID: 290211

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

30195 FRASER DR

LAKE ELSINORE, CA 92530

Phone: (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):

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## D. 专家名录

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


#### PSYCHOLOGIST

**BRUNETTO, HEIDI**

**Provider ID:** 290407

**Board Certified Specialty:** No  
**IHP OF SOUTHERN CAL-PHP**

 10039 VINE ST  
LAKESIDE, CA 92040

 **Phone:** (619) 390-9975

**Fax:** (360) 462-2744

 **After Hours Phone:** (619)  
390-9975

**Provider Gender:** Female

**NPI:** 1023250453

 **Provider English Spoken:** Y  
**Cultural Competency:** N


**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0\None

**American Sign Language (ASL):**

N

 **Accessibility:** CONTACT PROVIDER

 **Hours:** M-TH 8AM-5PM

 **Website:** N/A

**IPA:** IHP of Southern Cal-PHP

### 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

#### CERTIFIED NURSE

#### PRACTITIONER


**VAHDAT, VALERIE**

**Provider ID:** 306581

**Board Certified Specialty:** No  
**IHP OF SOUTHERN CAL-PHP**

 26926 CHERRY HILLS  
BLVD STE B

MENIFEE, CA 92586

 **Phone:** (951) 216-2200

**Fax:** (858) 633-4699

 **After Hours Phone:** (951)  
216-2200

**Provider Gender:** Female

**NPI:** 1093474090




 **Provider English Spoken:** Y  
**Cultural Competency:** N

**Medi-Cal Open Panel:** Yes

**Min/Max Age:** 0\None





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## D. 专家名录

*American Sign Language (ASL):* IHP OF SOUTHERN CAL-PHP  
N  
 *Accessibility:* CONTACT PROVIDER  
 *Hours:* M-F 8AM-5PM  
 *Website:* N/A  
*IPA:* IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **SMITH, KELLI**







*Provider ID:* 272954  
*Board Certified Specialty:* No  
UCSD MEDICAL GROUP  
 30420 HAUN RD  
MENIFEE, CA 92584  
 *Phone:* (951) 676-4193  
 *After Hours Phone:* (951) 676-4193  
*Provider Gender:* Female  
*NPI:* 1841771664  
 *Provider English Spoken:* Y  
*Cultural Competency:* N  
*Medi-Cal Open Panel:* Yes  
*Min/Max Age:* 0\None  
*American Sign Language (ASL):*  
N  
 *Accessibility:* CONTACT PROVIDER  
 *Hours:* M-F 8AM-5PM  
 *Website:* N/A  
*IPA:* UCSD Medical Group

### **MORENO VALLEY**

#### **OPTOMETRIST**

#### **BULLUM, ANTHONY**

*Provider ID:* 290330  
*Board Certified Specialty:* No

 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

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## D. 专家名录


MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/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): Network  
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

### CERTIFIED NURSE PRACTITIONER

**MIRACLE, ANGELYN**  
Provider ID: 300259  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE STE  
200  
MURRIETA, CA 92562  
 Phone: (951) 461-9300  
Fax: (951) 461-9399  
 After Hours Phone: (951)  
461-9300

Provider Gender: Female  
NPI: 1144539842  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: SU 8:30AM-0PM  
M-F 8AM-5PM  
SA 8:30AM-0PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### CERTIFIED NURSE PRACTITIONER

**SNYDER, MICHELLE**  
Provider ID: 210676

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## D. 专家名录

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

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## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL): American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: UCSD Medical Group

Min/Max Age: 0\None

American Sign Language (ASL): 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


### INTERNAL MEDICINE


#### CRITICAL CARE MEDICINE

#### **CHEN, KENNETH**

Provider ID: 283132

Board Certified Specialty: No  
UCSD MEDICAL GROUP



 25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562

 Phone: (951) 696-6000  
Fax: (951) 677-9757

 After Hours Phone: (951)  
696-6000

Provider Gender: Male

NPI: 1720472657

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

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: 202659

Board Certified Specialty: No


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## D. 专家名录

### UCSD MEDICAL GROUP

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

 Phone: (951) 696-6000

 After Hours Phone: (951)  
696-6000

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE RANCHO


SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

#### TRAN, LINH

Provider ID: 210573

Board Certified Specialty: No

UCSD MEDICAL GROUP

 41011 CALIFORNIA OAKS  
RD STE 104

MURRIETA, CA 92562

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1851682728

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, SOUTHWEST

HEALTHCARE RANCHO

SPRINGS HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERVENTIONAL


### CARDIOLOGY


#### AL KHIAMI, BELAL

Provider ID: 275994

Board Certified Specialty: No

UCSD MEDICAL GROUP

 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。






## D. 专家名录

Provider Gender: 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  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group






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

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):  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network, UCSD Medical Group





### MATERNAL AND FETAL MEDICINE

**MELBER, DORA**  
 Provider ID: 296992  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK  
 25500 MEDICAL CENTER  
 DR  
 MURRIETA, CA 92562  
 Phone: (858) 966-6710  
 Fax: (858) 966-6711  
 After Hours Phone: (858)  
 966-6710  
 Provider Gender: Female  
 NPI: 1124413026  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Hungarian,

### 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

### 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

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 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录


CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max 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

### NEONATAL / PERINATAL MEDICINE


**WEISS, KATHERINE**

Provider ID: 264676

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

 Phone: (951) 696-6000

Fax: (951) 696-6105

 After Hours Phone: (951)  
696-6000

Provider Gender: Female

NPI: 1053541862

 Provider English Spoken: Y

 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, UCSD Medical Group

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## D. 专家名录

### 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

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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*


### **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*

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## D. 专家名录

### **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

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## D. 专家名录

☎ *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*








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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*



### **OTOLARYNGOLOGY**

#### **BLISS, MORGAN**

*Provider ID: 215684*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 25170 HANCOCK AVE  
MURRIETA, CA 92562  
 *Phone: (951) 600-1640*  
*Fax: (951) 600-1760*  
 *After Hours Phone: (951) 600-1640*  
*Provider Gender: Female*  
*NPI: 1760707657*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **OTOLARYNGOLOGY**

#### **CARVALHO, DANIELA**








*Provider ID: 215332*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 25170 HANCOCK AVE  
MURRIETA, CA 92562  
 *Phone: (951) 600-1640*  
 *After Hours Phone: (951) 600-1640*  
*Provider Gender: Female*  
*NPI: 1154492916*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: French, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **OTOLARYNGOLOGY**

#### **FRIESEN, TZYYNONG**






*Provider ID: 244898*  
*Board Certified Specialty: No*

#### **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)*

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## D. 专家名录

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: No  
 RADY CHILDRENS HEALTH NETWORK  
 25170 HANCOCK AVE STE 1 MURRIETA, CA 92562  
 Phone: (951) 600-1640  
 Fax: (951) 600-1760  
 After Hours Phone: (951) 600-1640  
 Provider Gender: Male  
 NPI: 1508250747  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, VALLEY CHILDRENS HOSPITAL  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL): N

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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### **PEDIATRIC ALLERGY / IMMUNOLOGY**


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#### **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*

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### **PEDIATRIC CARDIOLOGY**


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#### **BORQUEZ, ALEJANDRO**

*Provider ID: 284119*

*Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK*

 25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562


 *Phone: (951) 600-1640*

*Fax: (951) 600-1760*

 *After Hours Phone: (951)  
600-1640*

*Provider Gender: Female*

*NPI: 1114277787*

 *Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*


*Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

---

### **PEDIATRIC CARDIOLOGY**


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#### **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*

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### **PEDIATRIC CARDIOLOGY**

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#### **DUMMER, KIRSTEN**

*Provider ID: 215645*




*Board Certified Specialty: No  
RADY CHILDRENS HEALTH*

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## D. 专家名录

### 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

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## D. 专家名录

IPA: Rady Childrens Health Network

### PEDIATRIC CARDIOLOGY

#### **WILLIAMS, MATTHEW**

Provider ID: 215678

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE  
MURRIETA, CA 92562

Phone: (951) 600-1640

After Hours Phone: (951) 600-1640

Provider Gender: Male

NPI: 1831423250

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **DEVERA, GEMMIE**

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

25500 MEDICAL CENTER DR

MURRIETA, CA 92562

Phone: (951) 696-6124

After Hours Phone: (951) 696-6124

Provider Gender: Female

NPI: 1366622078

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **DO, STEPHANIE**

Provider ID: 216969

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25500 MEDICAL CENTER DR

MURRIETA, CA 92562

Phone: (951) 696-6124

Fax: (951) 696-6293

After Hours Phone: (951) 696-6124

Provider Gender: Female

NPI: 1750513644

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Martin Luther King Jr Community Hospital, RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### **GROSS, MATTHEW**

Provider ID: 297173

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (858) 966-7800

Fax: (858) 966-8231

After Hours Phone: (858) 966-7800

Provider Gender: Male

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## D. 专家名录


NPI: 1942223664


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE

#### **INDRA, SEAN**


Provider ID: 302626

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25500 MEDICAL CENTER  
DR  
MURRIETA, CA 92562

 Phone: (951) 696-6124

Fax: (951) 696-6293

 After Hours Phone: (951)  
696-6124

Provider Gender: Male

NPI: 1427349091

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, VALLEY CHILDRENS  
HOSPITAL

Medi-Cal Open Panel: No  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


#### **KINGDON, JOANNA**

Provider ID: 302318

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE STE  
150

MURRIETA, CA 92562

 Phone: (858) 966-7800

Fax: (858) 966-8231

 After Hours Phone: (858)  
966-7800

Provider Gender: Female

NPI: 1609495399

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


#### **MESIWALA, ADNAN**

Provider ID: 275655

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25500 MEDICAL CENTER  
DR

MURRIETA, CA 92562

 Phone: (951) 696-6161

Fax: (951) 696-6105

 After Hours Phone: (951)  
696-6161

Provider Gender: Male

NPI: 1528483955

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Gujarati

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes


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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N  
Website: N/A  
IPA: Rady Childrens Health Network

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


### PEDIATRIC 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

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## D. 专家名录

### **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

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


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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE


#### **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 **SINGH, PUJA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Provider ID: 302819  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1841721172

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC GASTROENTEROLOGY

#### **CHU, CHRISTOPHER**

Provider ID: 301640

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE FL 1

MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Male

NPI: 1912369273

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish, Yue  
Chinese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC PULMONOLOGY

#### **LENHART-PENDERGRASS, PATRICIA**

Provider ID: 294382

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562

Phone: (951) 600-1640

Fax: (951) 600-1760

After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1144615659

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 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

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## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRICS

#### **LOPEZ, XIMENA**

Provider ID: 302857

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE FL 1  
MURRIETA, CA 92562


 Phone: (951) 600-1640


Fax: (951) 600-1760

 After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1740316405

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRICS

#### **NGO, MAI**

Provider ID: 302112

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 25170 HANCOCK AVE STE 1  
MURRIETA, CA 92562


 Phone: (951) 600-1640

Fax: (951) 600-1760

 After Hours Phone: (951)  
600-1640

Provider Gender: Female

NPI: 1508910787

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, 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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：

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## D. 专家名录

Board Certified Specialty: No  
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

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## D. 专家名录


### 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

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## D. 专家名录

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**


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Provider ID: 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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


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 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

IPA: UCSD Medical Group

### **SURGERY THORACIC**

#### **POLLEMA, TRAVIS**

Provider ID: 210577

Board Certified Specialty: No  
UCSD MEDICAL GROUP

41011 CALIFORNIA OAKS  
RD STE 104  
MURRIETA, CA 92562

Phone: (858) 657-7777

Fax: (888) 539-8781

After Hours Phone: (858)  
657-7777

Provider Gender: Male

NPI: 1871752956

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **NATIONAL CITY**

#### **CERTIFIED NURSE PRACTITIONER**

#### **CUNNINGHAM, ISIS**

Provider ID: 302115

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

655 EUCLID AVE STE 205  
NATIONAL CITY, CA 91950

Phone: (619) 470-1945

Fax: (619) 475-5048

After Hours Phone: (619)  
470-1945

Provider Gender: Female

NPI: 1770124927

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### **CERTIFIED NURSE PRACTITIONER**

#### **DE CASTRO, SHARLENE**

#### **JOYCE**

Provider ID: 299158

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

2743 HIGHLAND AVE  
NATIONAL CITY, CA 91950

Phone: (844) 200-2426

Fax: (619) 339-5657

After Hours Phone: (844)

200-2426

Provider Gender: Female

NPI: 1750019824

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-6PM  
F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

#### **CERTIFIED NURSE PRACTITIONER**

#### **DRISCOLL, SUSAN**

Provider ID: 301775

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

330 E 8TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 662-4100

Fax: (619) 259-2807

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1477755684

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N
































Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p>N</p> <p> <b>Accessibility: CONTACT PROVIDER</b></p> <p> <b>Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM</b></p> <p> <b>Website: N/A</b></p> <p><b>IPA: IHP of Southern Cal-PHP</b></p>	<hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>GULLY, MICHELLE</b></p> <p><b>Provider ID: 299422</b></p> <p><b>Board Certified Specialty: No</b></p> <p><b>COMMUNITY CARE IPA LLC</b></p> <p> 1428 HIGHLAND AVE NATIONAL CITY, CA 91950</p> <p> <b>Phone: (844) 200-2426</b></p> <p><b>Fax: (619) 434-1613</b></p> <p> <b>After Hours Phone: (844) 200-2426</b></p> <p><b>Provider Gender: Female</b></p> <p><b>NPI: 1801557947</b></p> <p> <b>Provider English Spoken: Y</b></p> <p><b>Cultural Competency: N</b></p> <p><b>Medi-Cal Open Panel: Yes</b></p> <p><b>Min/Max Age: 0\None</b></p> <p><b>American Sign Language (ASL):</b></p> <p>N</p> <p> <b>Accessibility: CONTACT PROVIDER</b></p> <p> <b>Hours: M-F 8AM-5PM</b></p> <p> <b>Website: N/A</b></p> <p><b>IPA: Community Care IPA LLC</b></p>	<p> <b>After Hours Phone: (844) 200-2426</b></p> <p><b>Provider Gender: Female</b></p> <p><b>NPI: 1093130395</b></p> <p> <b>Provider English Spoken: Y</b></p> <p> <b>Provider Language(s) Spoken: Tagalog</b></p> <p><b>Cultural Competency: N</b></p> <p><b>Medi-Cal Open Panel: Yes</b></p> <p><b>Min/Max Age: 0\None</b></p> <p><b>American Sign Language (ASL):</b></p> <p>N</p> <p> <b>Accessibility: CONTACT PROVIDER</b></p> <p> <b>Hours: M-TU 8:30AM-5:30PM W 10AM-7PM TH-F 8:30AM-5:30PM</b></p> <p> <b>Website: N/A</b></p> <p><b>IPA: Community Care IPA LLC</b></p>
<hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>DRISCOLL, SUSAN</b></p> <p><b>Provider ID: 301774</b></p> <p><b>Board Certified Specialty: No</b></p> <p><b>IHP OF SOUTHERN CAL-PHP</b></p> <p> 340 E 8TH ST NATIONAL CITY, CA 91950</p> <p> <b>Phone: (619) 662-4100</b></p> <p><b>Fax: (619) 259-2807</b></p> <p> <b>After Hours Phone: (619) 662-4100</b></p> <p><b>Provider Gender: Female</b></p> <p><b>NPI: 1477755684</b></p> <p> <b>Provider English Spoken: Y</b></p> <p> <b>Provider Language(s) Spoken: Spanish</b></p> <p><b>Cultural Competency: N</b></p> <p><b>Medi-Cal Open Panel: Yes</b></p> <p><b>Min/Max Age: 12\None</b></p> <p><b>American Sign Language (ASL):</b></p> <p>N</p> <p> <b>Accessibility: CONTACT PROVIDER</b></p> <p> <b>Hours: SU 10AM-4PM M-F 8:30AM-5:30PM SA 8AM-2:30PM</b></p> <p> <b>Website: N/A</b></p> <p><b>IPA: IHP of Southern Cal-PHP</b></p>	<hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>LIM, IMELDA</b></p> <p><b>Provider ID: 294308</b></p> <p><b>Board Certified Specialty: No</b></p> <p><b>COMMUNITY CARE IPA LLC</b></p> <p> 2743 HIGHLAND AVE NATIONAL CITY, CA 91950</p> <p> <b>Phone: (844) 200-2426</b></p> <p><b>Fax: (619) 474-3919</b></p>	<hr/> <p style="text-align: center;"><b><u>CERTIFIED NURSE</u></b> <b><u>PRACTITIONER</u></b></p> <hr/> <p><b>MIDORO, ABEGAILLE</b></p> <p><b>Provider ID: 303827</b></p> <p><b>Board Certified Specialty: No</b></p> <p><b>COMMUNITY CARE IPA LLC</b></p> <p> 2835 HIGHLAND AVE STE B NATIONAL CITY, CA 91950</p> <p> <b>Phone: (844) 200-2426</b></p> <p><b>Fax: (619) 477-2628</b></p> <p> <b>After Hours Phone: (844) 200-2426</b></p> <p><b>Provider Gender: Female</b></p> <p><b>NPI: 1952925851</b></p> <p> <b>Provider English Spoken: Y</b></p> <p> <b>Provider Language(s) Spoken: Tagalog</b></p>


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## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER

 Hours: M-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: 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

#### **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)

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## D. 专家名录

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, VANESSAMARIA**

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

SA 8AM-2:30PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### 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,  
ALVARADO HOSPITAL LLC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-6PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### INTERVENTIONAL CARDIOLOGY

#### **CAMACHO, BENJAMIN**

Provider ID: 290137  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1615 SWEETWATER RD STE  
D  
NATIONAL CITY, CA 91950  
Phone: (619) 474-2233  
Fax: (619) 474-2211  
After Hours Phone: (619)  
474-2233  
Provider Gender: Male  
NPI: 1699759936  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### INTERVENTIONAL

### CARDIOLOGY

#### **CAMACHO, BENJAMIN**

Provider ID: 35045  
Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD  
1615 SWEETWATER RD  
NATIONAL CITY, CA 91950  
Phone: (619) 474-2233  
Fax: (619) 474-2211  
After Hours Phone: (619)  
474-2233  
Provider Gender: Male  
NPI: 1699759936  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER  
Hours: M-F 9AM-6PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

### INTERVENTIONAL CARDIOLOGY

#### **DAMANI, SAMIR**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Provider ID: 303098

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

655 EUCLID AVE STE 401  
NATIONAL CITY, CA 91950

Phone: (858) 800-2480

Fax: (858) 216-1908

After Hours Phone: (858)  
800-2480

Provider Gender: Male

NPI: 1457379372

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### INTERVENTIONAL CARDIOLOGY

#### **PANDHI, JAY**

Provider ID: 269087

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

655 EUCLID AVE STE 208  
NATIONAL CITY, CA 91950

Phone: (619) 512-1915

Fax: (619) 512-1913

After Hours Phone: (619)  
512-1915

Provider Gender: Male

NPI: 1407997406

Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: PARADISE  
VALLEY HOSPITAL, SCRIPPS  
MERCY HOSPITAL CHULA

VISTA, SHARP CHULA VISTA  
MED CTR, SCRIPPS MERCY  
HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### INTERVENTIONAL CARDIOLOGY

#### **ROUGH, STEVEN**

Provider ID: 301320

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1415 E 8TH ST STE 6  
NATIONAL CITY, CA 91950

Phone: (619) 434-4288

Fax: (619) 434-4315

After Hours Phone: (619)  
434-4288

Provider Gender: Male

NPI: 1386821460

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max 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






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

*Cultural Competency: N*  
*Hospital Affiliation: 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*

### **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*

### **NEPHROLOGY**






#### **COMUNALE, RODERICK**

*Provider ID: 290784*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 502 EUCLID AVE STE 205  
 NATIONAL CITY, CA 91950  
 *Phone: (858) 551-0276*  
*Fax: (858) 454-8796*  
 *After Hours Phone: (858)*  
*551-0276*  
*Provider Gender: Male*  
*NPI: 1568462109*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP*  
*CHULA VISTA MED CTR,*  
*SCRIPPS MERCY HOSPITAL*  
*CHULA VISTA, PARADISE*  
*VALLEY HOSPITAL,*  
*ALVARADO HOSPITAL LLC,*

*SCRIPPS MERCY HOSPITAL,*  
*KINDRED HOSPITAL SAN*  
*DIEGO, SELECT SPECIALTY*  
*HOSPITAL SAN DIEGO,*  
*SELECT SPECIALTY HOSPITAL*  
*SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 21\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 9AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### **OBSTETRICS / GYNECOLOGY**




#### **ASLIAN, AZITA**

*Provider ID: 301797*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1136 D AVE  
 NATIONAL CITY, CA 91950  
 *Phone: (619) 662-4100*  
*Fax: (619) 336-2323*  
 *After Hours Phone: (619)*  
*662-4100*  
*Provider Gender: Female*  
*NPI: 1851667661*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Faroese, Fataleka*  
*Cultural Competency: N*  
*Hospital Affiliation: Hemet*  
*Global Medical Center, Menifee*  
*Global Medical Center,*  
*SCRIPPS MERCY HOSPITAL*

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## D. 专家名录

CHULA VISTA, SCRIPPS  
MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **OBSTETRICS / GYNECOLOGY**

#### **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







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## D. 专家名录

 Website: N/A  
IPA: BLUE SHIELD PROMISE  
HEALTH PLAN DIRECT,  
Community Care IPA LLC,  
Rady Childrens Health  
Network

### **OBSTETRICS / GYNECOLOGY**


#### **WINESBURG, JENNIFER**




Provider ID: 302451  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 2400 E 8TH ST STE 8  
NATIONAL CITY, CA 91950  
 Phone: (619) 662-4100  
Fax: (619) 259-2807  
 After Hours Phone: (619)  
662-4100  
Provider Gender: Female  
NPI: 1811162456  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR,  
GROSSMONT HOSPITAL,  
DESERT REGIONAL MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

#### **HAIGHT, BRUCE**



Provider ID: 269113  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950  
 Phone: (800) 898-2020  
Fax: (844) 897-3788  
 After Hours Phone: (800)  
898-2020  
Provider Gender: Male  
NPI: 1427029628  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:  
GROSSMONT HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP




### **OPTOMETRIST**

#### **AOTO, KIM**

Provider ID: 268722  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC





 2240 E PLAZA BLVD STE  
F-G  
NATIONAL CITY, CA 91950  
 Phone: (800) 898-2020  
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: 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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### OPTOMETRIST

#### KOO, ANITA

Provider ID: 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

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### 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

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### 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

---


### 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

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## D. 专家名录

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC

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  
 N

### 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



























### PODIATRIST

**DAVIDSONIII, 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

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## D. 专家名录

<p><b><u>PULMONARY DISEASES</u></b></p> <p><b>LIM, ROSEMARIE</b>            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</p>	<p>IPA: Imperial Health Holdings            Medical Group-SD</p> <p><b><u>REGISTERED PHYSICAL            THERAPIST</u></b></p> <p><b>CHENG, BRANDON</b>            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</p> <p><b><u>REGISTERED PHYSICAL            THERAPIST</u></b></p> <p><b>JIMENEZ, ANDREA</b>            Provider ID: 299888            Board Certified Specialty: No</p>	<p>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</p> <p><b><u>REGISTERED PHYSICAL            THERAPIST</u></b></p> <p><b>KARANDE, PRACHI</b>            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</p>
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## D. 专家名录

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

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### 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


---

#### **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


---

#### **NOVENCIDO, ANDREW**

Provider ID: 301996

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000  
Fax: (619) 695-0050

 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### REGISTERED PHYSICAL THERAPIST


---

#### **NOVENCIDO, ANDREW**

Provider ID: 286784

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950

 Phone: (619) 482-3000  
Fax: (619) 695-0050





 After Hours Phone: (619)  
482-3000

Provider Gender: Male

NPI: 1447723937







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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### REGISTERED PHYSICAL THERAPIST








#### **SPARKS, TODD**

Provider ID: 301110  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 3400 E 8TH ST STE 108  
NATIONAL CITY, CA 91950  
 Phone: (619) 482-3000  
Fax: (619) 695-0050  
 After Hours Phone: (619)  
482-3000  
Provider Gender: Male  
NPI: 1265481139  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M 7AM-7PM  
TU 7AM-0PM  
W-TH 7AM-7PM  
F 7AM-0PM  
 Website: N/A  
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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: 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: 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

**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




**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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录





N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Community Care IPA LLC, IHP of Southern Cal-PHP*




---

### **CERTIFIED ACUPUNCTURIST**

#### **GONZALEZ, ANDRES**

*Provider ID: 308047*  
*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*  
 3988 VISTA WAY STE G  
OCEANSIDE, CA 92056  
 *Phone: (760) 736-6767*  
*Fax: (760) 736-6744*  
 *After Hours Phone: (760) 736-6767*  
*Provider Gender: Male*  
*NPI: 1841857729*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Chinese, 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*

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### **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*

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### **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*

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## D. 专家名录








American Sign Language (ASL):  Website: N/A  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TU 8AM-5PM  
 W 8AM-7PM  
 TH-F 8AM-5PM  
 SA 9AM-6PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

**BINETTE, DONYA**  
 Provider ID: 303861  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 2210 MESA DR STE 300  
 OCEANSIDE, CA 92054  
 Phone: (760) 736-6767  
 Fax: (760) 736-8740  
 After Hours Phone: (760) 736-6767  
 Provider Gender: Female  
 NPI: 1427325166  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Spanish  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 SA 8AM-4:30PM








Website: N/A  
 IPA: Rady Childrens Health Network

### CERTIFIED NURSE PRACTITIONER

**CHILAKA, SAMUEL**  
 Provider ID: 301313  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 818 PIER VIEW WAY  
 OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Provider Gender: Male  
 NPI: 1679140644  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-8PM  
 F 8AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

**CHILAKA, SAMUEL**  
 Provider ID: 301314  
 Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP  
 4700 N RIVER RD  
 OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Provider Gender: Male  
 NPI: 1679140644  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 8AM-8PM  
 F 8AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER


**CHILAKA, SAMUEL**  
 Provider ID: 301315  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 517 N HORNE ST  
 OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
 Provider Gender: Male  
 NPI: 1679140644


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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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#### **CHRISTY, TYLER**

Provider ID: 303930

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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#### **CHRISTY, TYLER**

Provider ID: 303931

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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#### **CHRISTY, TYLER**

Provider ID: 307299

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

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### **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

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## D. 专家名录

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

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### **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: 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

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## D. 专家名录


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **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: 302300

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013668680

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

**HERNANDEZ, JESSICA**

Provider ID: 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**


---

**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):

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## D. 专家名录

N  
🗺️ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**HUERTA, STEVEN**  
Provider ID: 307932  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
🗺️ 517 N HORNE ST  
OCEANSIDE, CA 92054  
📞 Phone: (760) 631-5000  
📠 Fax: (760) 414-3892  
🕒 After Hours Phone: (760) 631-5000  
Provider Gender: Male  
NPI: 1558607440  
🗺️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
🗺️ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**

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**HUERTA, STEVEN**  
Provider ID: 307935

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
🗺️ 4700 N RIVER RD  
OCEANSIDE, CA 92057  
📞 Phone: (760) 631-5000  
📠 Fax: (760) 414-3892

🕒 After Hours Phone: (760) 631-5000  
Provider Gender: Male  
NPI: 1558607440  
🗺️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
🗺️ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **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

Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
🗺️ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network

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### **CERTIFIED NURSE** **PRACTITIONER**

---

**KELLEHER, BRIDGET**  
Provider ID: 298084  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
🗺️ 4700 N RIVER RD  
OCEANSIDE, CA 92057  
📞 Phone: (760) 631-5000  
🕒 After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1245695006  
🗺️ Provider English Spoken: Y  
🗺️ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: TRI CITY MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

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### **CERTIFIED NURSE PRACTITIONER**


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#### **KELLEHER, BRIDGET**

*Provider ID: 298082*

*Board Certified Specialty: No IHP OF SOUTHERN CAL-PHP*


 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*

 *After Hours Phone: (760) 631-5000*

*Provider Gender: Female*

*NPI: 1245695006*

 *Provider English Spoken: Y*

 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: TRI CITY MEDICAL CTR*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP, Rady Childrens Health Network*

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### **CERTIFIED NURSE PRACTITIONER**


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#### **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*

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### **CERTIFIED NURSE PRACTITIONER**


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#### **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*

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### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 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**


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**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

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### **CERTIFIED NURSE PRACTITIONER**


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**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**


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**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

NPI: 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

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### **CERTIFIED NURSE PRACTITIONER**


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**SANTIAGO, AMANDA**

Provider ID: 242607

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 4700 N RIVER RD  
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1619488731

 Provider English Spoken: Y

 Provider Language(s)  
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

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### **CERTIFIED NURSE PRACTITIONER**


---

**TAYLOR, CHRISTOPHER**

Provider ID: 295503

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1851747166


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-2PM  
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,

Rady Childrens Health  
Network

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### **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-2PM  
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

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### **CERTIFIED NURSE PRACTITIONER**

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**TAYLOR, CHRISTOPHER**

Provider ID: 295506

Board Certified Specialty: No

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### IHP OF SOUTHERN CAL-PHP

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1851747166

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-2PM  
SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **CERTIFIED REGISTERED NURSE MIDWIFE**

#### **KELLY, KATHERINE**

Provider ID: 290312

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

2210 MESA DR STE 5  
OCEANSIDE, CA 92054

Phone: (760) 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### IHP OF SOUTHERN CAL-PHP

 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

 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

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## D. 专家名录

### **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: 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

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU 8AM-5PM

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

W 8AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM  
Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### 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

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录


---

### **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

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### **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

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## D. 专家名录

Network

### **MATERNAL AND FETAL MEDICINE**

**WILLIAMS, KRISTIN**

Provider ID: 206230

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858)  
966-6710

Provider Gender: Female

NPI: 1992847131

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
SAN MATEO MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND

NEWBORNS, TRI CITY  
MEDICAL CTR, CALIFORNIA  
PACIFIC MED CTR,

CALIFORNIA PACIFIC MED  
CTR, RADY CHILDRENS

HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### **NEPHROLOGY**

**LIU, ANDREW**

Provider ID: 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

### **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

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## D. 专家名录

 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

### 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 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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

**PROVIDER**  
 Hours: M-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

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## D. 专家名录

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,

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## D. 专家名录

SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):




N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network


### OPHTHALMOLOGY

#### **SHEILS, CATHERINE**

Provider ID: 305308  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP


 3637 VISTA WAY  
OCEANSIDE, CA 92056  
 Phone: (760) 758-2008  
Fax: (760) 758-2004  
 After Hours Phone: (760) 758-2008

Provider Gender: Female  
NPI: 1932605649

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, 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,  
UCSD Medical Group

### OPHTHALMOLOGY



#### **SONG, DELU**

Provider ID: 302871  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3231 WARING CT STE S  
OCEANSIDE, CA 92056  
 Phone: (760) 631-6144  
Fax: (760) 724-3920

 After Hours Phone: (760) 631-6144

Provider Gender: Male  
NPI: 1437689536


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Chinese, Mandarin

Cultural Competency: N  
Hospital Affiliation: TRI CITY  
MEDICAL CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group


### OPTOMETRIST

#### **GEE, JENNIFER**

Provider ID: 290927


Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

Provider Gender: Female  
NPI: 1336589332

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation:

COMMUNITY REGIONAL  
MEDICAL CENTER-FRESNO,  
CALIFORNIA PACIFIC  
MEDICAL CENTER - D P APH  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### **GEE, JENNIFER**

Provider ID: 290210

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 517 N HORNE ST

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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-0PM  
🌐 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):  
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







### **OPTOMETRIST**

#### **TRAN, JESSICA**





Provider ID: 303732  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 4700 N RIVER RD  
OCEANSIDE, CA 92057




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## D. 专家名录




 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1457922957  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 5\21  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **OPTOMETRIST**




**TRAN, JESSICA**  
Provider ID: 303730  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1457922957  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 5\21  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**




**TRAN, JESSICA**  
Provider ID: 303731  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000


Provider Gender: Female  
NPI: 1457922957  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 5\21  
American Sign Language (ASL): N




 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**





**TRAN, JESSICA**  
Provider ID: 304886

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000

Provider Gender: Female  
NPI: 1457922957  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPTOMETRIST**


**TRAN, JESSICA**  
Provider ID: 304887  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760) 631-5000  
Provider Gender: Female  
NPI: 1457922957  
 Provider English Spoken: Y

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## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: 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


#### **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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (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 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

#### **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*

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE

#### **GROSS, MATTHEW**

Provider ID: 297175

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1000  
Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1000

Provider Gender: Male

NPI: 1942223664

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE

#### **KINGDON, JOANNA**

Provider ID: 302319

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK



 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056

 Phone: (760) 547-1000  
Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1000

Provider Gender: Female

NPI: 1609495399

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM

M-F 4PM-10PM

SA 1PM-10PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC EMERGENCY MEDICINE

#### **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






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## D. 专家名录

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








#### **QUINONES-PEREZ, BIANCA**

Provider ID: 206951  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK  
 3605 VISTA WAY STE 172  
 OCEANSIDE, CA 92056  
 Phone: (760) 547-1000  
 Fax: (760) 547-1021  
 After Hours Phone: (760) 547-1000  
 Provider Gender: Female  
 NPI: 1124360565  
 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: SU 1PM-10PM  
 M-F 4PM-10PM

SA 1PM-10PM  
 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) 547-1000  
 Provider Gender: Male  
 NPI: 1215564265  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\19  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: SU 1PM-10PM  
 M-F 4PM-10PM  
 SA 1PM-10PM  
 Website: N/A  
 IPA: Rady Childrens Health  
 Network

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## D. 专家名录

<b>PEDIATRIC EMERGENCY MEDICINE</b>	<b>PEDIATRIC EMERGENCY MEDICINE</b>	<b>PEDIATRIC GASTROENTEROLOGY</b>
<b>TODD, SARAH</b> 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	<b>VAIDYA, KAMALA</b> 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	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
<b>PEDIATRIC EMERGENCY MEDICINE</b>	<b>VARGAS, JACLYN</b> Provider ID: 296485	<b>CHU, CHRISTOPHER</b> Provider ID: 301642 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056


 Phone: (760) 547-1020


Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Male

NPI: 1912369273

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish, Yue  
Chinese

Cultural Competency: N

Hospital Affiliation: RADY


CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC PULMONOLOGY

**LENHART-PENDERGRASS,  
PATRICIA**

Provider ID: 294643

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056


 Phone: (760) 547-1020

Fax: (760) 547-1021

 After Hours Phone: (760)  
547-1020

Provider Gender: Female

NPI: 1144615659


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PHYSICAL MEDICINE / REHABILITATION

**RICHARDSON, HENRY**

Provider ID: 295852

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3231 WARING CT STE K  
OCEANSIDE, CA 92056

 Phone: (760) 607-5350

Fax: (760) 607-5365

 After Hours Phone: (760)  
607-5350

Provider Gender: Male

NPI: 1407052459

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL, SCRIPPS  
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

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## D. 专家名录






 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*




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### 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*

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### PHYSICIANS ASSISTANT


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#### 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*

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### 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

---

#### COOK, SHERYL



*Provider ID: 304924*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 *619 CROUCH ST STE 100 OCEANSIDE, CA 92054*  
 *Phone: (760) 736-6767*  
*Fax: (760) 736-6744*  
 *After Hours Phone: (760) 736-6767*  
*Provider Gender: Female*  
*NPI: 1750420816*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Hours: M 9AM-6:15PM  
W 9AM-6PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

#### **JENSEN, BRIAN**


Provider ID: 290775  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 619 CROUCH ST  
OCEANSIDE, CA 92054  
 Phone: (760) 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



### REGISTERED PHYSICAL THERAPIST

#### **FARRAR, COURTNEY**



Provider ID: 295874  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 3231 WARING CT STE K  
OCEANSIDE, CA 92056  
 Phone: (760) 607-5350  
Fax: (760) 607-5365

 After Hours Phone: (760)  
607-5350

Provider Gender: Male  
NPI: 1124577952

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 13\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A


IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### SURGERY ORTHOPEDIC

#### **CIDAMBI, EMILY**


Provider ID: 246469  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3605 VISTA WAY STE 172  
OCEANSIDE, CA 92056



 Phone: (858) 966-6789  
Fax: (858) 966-8519

 After Hours Phone: (858)  
966-6789

Provider Gender: Female  
NPI: 1659634699

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: Rady Childrens Health  
Network

### SURGERY ORTHOPEDIC

#### **PRUSS, ERIKA**

Provider ID: 303798  
Board Certified Specialty: No

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## D. 专家名录

### 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): Network

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

### **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

### **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,



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## D. 专家名录

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

### 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

#### 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-F 8AM-5PM  
 Website: N/A  
 IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### CERTIFIED NURSE PRACTITIONER


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**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

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### 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

 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

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### 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
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

### 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

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## D. 专家名录

15611 POMERADO RD STE 400  
POWAY, CA 92064  
Phone: (858) 675-3200  
Fax: (858) 613-2938  
After Hours Phone: (858) 675-3200  
Provider Gender: Female  
NPI: 1295701159

Provider English Spoken: Y  
Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: Community Care IPA LLC

### INTERNAL MEDICINE

#### **CHEN, ANDREW**

Provider ID: 269315  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

15611 POMERADO RD STE 400  
POWAY, CA 92064  
Phone: (858) 675-3100  
Fax: (858) 613-2937  
After Hours Phone: (858) 675-3100  
Provider Gender: Male

NPI: 1134357007  
Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: SCRIPPS GREEN HOSPITAL, PALOMAR HEALTH, PALOMAR MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
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

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## D. 专家名录

 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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

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

### PHYSICIANS ASSISTANT


#### **CHATFIELD, ALEXANDRA**

Provider ID: 276715

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 15611 POMERADO RD STE 525  
POWAY, CA 92064

POWAY, CA 92064

 Phone: (858) 485-0050

Fax: (858) 673-5187

 After Hours Phone: (858) 485-0050

Provider Gender: Female

NPI: 1215584628

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Community Care IPA LLC


### PODIATRIST

#### **BRAZIER, SETH**

Provider ID: 306398

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 15706 POMERADO RD STE 102  
POWAY, CA 92064

 Phone: (858) 485-1494

Fax: (858) 485-1515

 After Hours Phone: (858) 485-1494

Provider Gender: Male

NPI: 1033554324

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

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## D. 专家名录

Hospital Affiliation: KAWEAH DELTA DISTRICT HOSP, SELMA COMMUNITY HOSPITAL, ADVENTIST MEDICAL CENTER, ADVENTIST MED CTR REEDLEY


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

### PODIATRIST


#### 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 9AM-5PM

 Website: N/A

IPA: 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

### PSYCHOLOGIST


#### VALLEZ-BARLAM, ANDREA

Provider ID: 290629

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 13010 POWAY RD

POWAY, CA 92064

 Phone: (858) 218-3000

Fax: (858) 633-4688

 After Hours Phone: (858) 218-3000

Provider Gender: Female

NPI: 1710902143

 Provider English Spoken: Y

 Provider Language(s)

Spoken: German, Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

### RHEUMATOLOGY

#### RAO, SOUMYA

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## D. 专家名录

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)

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

IPA: Community Care IPA LLC

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### SAN DIEGO

#### ADOLESCENT MEDICINE

##### CHELVAKUMAR, GAYATHRI

Provider ID: 296674

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

8110 BIRMINGHAM WAY FL  
2

SAN DIEGO, CA 92123

Phone: (858) 966-8493

Fax: (858) 966-8818

After Hours Phone: (858)  
966-8493

Provider Gender: Female

NPI: 1447473848

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

#### ADVANCED HEART FAILURE AND TRANSPLANT CARDIOLOGY

##### HONG, KIMBERLY

Provider ID: 246311

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4168 FRONT ST  
SAN DIEGO, CA 92103

Phone: (858) 657-8530

After Hours Phone: (858)  
657-8530

Provider Gender: Female

NPI: 1346515442

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

#### ALLERGY IMMUNOLOGY

##### JAMES, CHRISTINE

Provider ID: 284917

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1144589979

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

#### ALLERGY IMMUNOLOGY

##### RIEDL, MARC

Provider ID: 255768

Board Certified Specialty: Yes  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN STE 230

SAN DIEGO, CA 92122

Phone: (858) 657-5350

After Hours Phone: (858)  
657-5350

Provider Gender: Male

NPI: 1285654889

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 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**


**CANO, SARAH**

Provider ID: 200959

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750517306

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, SCRIPPS

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## D. 专家名录


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**

---


#### **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

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **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**


#### **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

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## D. 专家名录

 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**



#### **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


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## D. 专家名录

American Sign Language (ASL): **SORIA, CLAIRE**

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **ANESTHESIOLOGY**


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**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

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### **ANESTHESIOLOGY**


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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

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### **ANESTHESIOLOGY**


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**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**


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**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

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## D. 专家名录

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

 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: 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

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## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group



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### **ANESTHESIOLOGY**

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#### **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

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### **ANESTHESIOLOGY**

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#### **YODER, ANDREA**

Provider ID: 272804  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1629463104

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **ANESTHESIOLOGY**

---

#### **YOUNAN, LAWRENCE**

Provider ID: 240870  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1922432475

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **ANESTHESIOLOGY CRITICAL**

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#### **CARE MEDICINE**

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#### **KRAUSE, MARTIN**

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

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## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### ANESTHESIOLOGY PAIN MANAGEMENT

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#### **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


Medi-Cal Open 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

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### CARDIAC ELECTROPHYSIOLOGY

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#### **HAN, FREDERICK**








Provider ID: 210012

Board Certified Specialty: No

UCSD MEDICAL GROUP





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## D. 专家名录

 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)




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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Spoken: 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**

**LERNER, JONATHAN**  
Provider ID: 303447  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 292 EUCLID AVE STE 210  
SAN DIEGO, CA 92114  
 Phone: (619) 616-2100  
Fax: (619) 616-2104  
 After Hours Phone: (619)  
616-2100  
Provider Gender: Male  
NPI: 1962899823  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **CARDIOVASCULAR DISEASE**

**LERNER, JONATHAN**  
Provider ID: 309267  
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: 1962899823  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **CARDIOVASCULAR DISEASE**

**MIZZELL, ANNA**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

Provider 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**

#### **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, ALVARADO

HOSPITAL LLC, SHARP CHULA  
VISTA MED CTR, TRI CITY  
MEDICAL CTR, TRI CITY  
MEDICAL CTR, SCRIPPS  
MERCY HOSPITAL CHULA

VISTA, Sharp Grossmont  
Hospital, SHARP CORONADO  
HOSP AND HEALTHCARE CTR  
Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP


### **CARDIOVASCULAR DISEASE**


#### **YEANG, CALVIN**

Provider ID: 238822

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (858) 657-8530

 After Hours Phone: (858)  
657-8530

Provider Gender: Male

NPI: 1598011058

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **CERTIFIED ACUPUNCTURIST**

#### **ARELLANO, JACQUELINE**

Provider ID: 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: 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: 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

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A


IPA: UCSD Medical Group


### **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

### **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**

**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

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## D. 专家名录

JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



### **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: 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: 304131  
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: 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

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## D. 专家名录

SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1407401128

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Tagalog

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 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**

#### **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

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## D. 专家名录

### **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**

#### **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

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## D. 专家名录

### UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: 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):

 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):

 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):

 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

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## D. 专家名录

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

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **BUI, ANH**

Provider ID: 304273

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)  
279-0925

Provider Gender: Male

NPI: 1184309684

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **BUI, ANH**

Provider ID: 304272

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)  
810-8700

Provider Gender: Male

NPI: 1184309684

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 14\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **CAMARGO-LOWTHERS, ANGELICA**

Provider ID: 295914

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

8010 FROST ST STE 220  
SAN DIEGO, CA 92123

Phone: (858) 650-5000

Fax: (858) 636-2903

After Hours Phone: (858)  
650-5000

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **CAMARGO-LOWTHERS, ANGELICA**

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## D. 专家名录

Provider ID: 54944  
Board Certified Specialty: No  
BALBOA NEPHROLOGY MED  
GRP INC

8010 FROST ST STE 510  
SAN DIEGO, CA 92123

Phone: (858) 637-4700  
Fax: (858) 637-4701

After Hours Phone: (858)  
637-4700

Provider Gender: Female  
NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

### CERTIFIED NURSE PRACTITIONER

**CAMARGO-LOWTHERS,  
ANGELICA**

Provider ID: 307993

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

8010 FROST ST STE 100

SAN DIEGO, CA 92123  
Phone: (858) 640-5000  
Fax: (858) 636-2903

After Hours Phone: (858)  
640-5000

Provider Gender: Female

NPI: 1912982539

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP,

Imperial Health Holdings

Medical Group-SD

### CERTIFIED NURSE PRACTITIONER

**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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **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: 286368*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 4303 LA JOLLA VILLAGE  
DR STE 2110

SAN DIEGO, CA 92122

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1104173558*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL*  
*CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **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*

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## D. 专家名录





 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *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*

---

### **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*

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### **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*

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **CONNOR, CAROLINE**

*Provider ID: 279835*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*


 *16950 VIA TAZON*  
*SAN DIEGO, CA 92127*

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1609081710*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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**COSINO, ANJELICA**

Provider ID: 201309

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1295238749

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**

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**DAVIES, SUMMER**

Provider ID: 253692

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN STE 220

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1679850671

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


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**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

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### **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

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: SHARP  
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER


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#### **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

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### CERTIFIED NURSE PRACTITIONER


---

#### **DEL VECCHIO, MEGAN**

Provider ID: 301726

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1437662863

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER


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#### **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

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### 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

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## D. 专家名录


CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER


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**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

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### CERTIFIED NURSE

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### PRACTITIONER


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**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

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### CERTIFIED NURSE PRACTITIONER


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**DRISCOLL, KARRIE**

Provider ID: 286345

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4303 LA JOLLA VILLAGE  
DR STE 2110

 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

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### CERTIFIED NURSE PRACTITIONER


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**DRISCOLL, SUSAN**

Provider ID: 298968

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173

 Phone: (619) 662-4100  
Fax: (619) 758-3384

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1477755684

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 12\None

American Sign Language (ASL):  
N



N

 Accessibility: CONTACT

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## D. 专家名录

### PROVIDER

 Hours: SU 10AM-4PM  
M-F 8:30AM-5:30PM  
SA 8AM-2:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER


#### 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

Provider ID: 309725  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 8010 FROST ST STE 100  
SAN DIEGO, CA 92123  
 Phone: (858) 650-5000  
Fax: (858) 636-2903  
 After Hours Phone: (858)

650-5000

Provider Gender: Female  
NPI: 1548027964  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER



#### EDNACOT, KARYNNE

Provider ID: 309540  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 8010 FROST ST STE 100  
SAN DIEGO, CA 92123  
 Phone: (858) 650-5000  
Fax: (858) 636-2903  
 After Hours Phone: (858)  
650-5000  
Provider Gender: Female  
NPI: 1548027964  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录


### PROVIDER



 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER

#### ERICKSON, LISA

Provider ID: 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


### CERTIFIED NURSE PRACTITIONER

#### FELD, KEREN

Provider ID: 297672  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250  
Fax: (858) 633-4681

 After Hours Phone: (619)  
563-0250

Provider Gender: Female  
NPI: 1730835083


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-2PM

 Website: N/A


IPA: IHP of Southern Cal-PHP


### CERTIFIED NURSE PRACTITIONER

#### FISHER, SLOANE

Provider ID: 301585  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female  
NPI: 1538807003

 Provider English Spoken: Y  
Cultural Competency: N



Hospital Affiliation: RADY

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## D. 专家名录

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  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group




### CERTIFIED NURSE PRACTITIONER



**GIORGI, ASHLEY**  
Provider ID: 304877  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4290 POLK AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 563-0250  
Fax: (858) 633-4681  
 After Hours Phone: (619) 563-0250  
Provider Gender: Female  
NPI: 1952174203  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
SA 8AM-2PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




### CERTIFIED NURSE PRACTITIONER

**GOMEZ, LESLIE**

Provider ID: 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

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## D. 专家名录

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

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### 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

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### CERTIFIED NURSE PRACTITIONER


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#### **HA, THU**

Provider ID: 293261

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### CERTIFIED NURSE PRACTITIONER

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#### **HA, THU**

Provider ID: 293260

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

Provider Gender: Female

NPI: 1346443983

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### CERTIFIED NURSE PRACTITIONER


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#### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **CERTIFIED NURSE PRACTITIONER**

#### **HAROUSH, GAL**


*Provider ID: 302475*

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

 4973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

*Fax: (858) 633-4680*

 *After Hours Phone: (858) 279-0925*

*Provider Gender: Female*

*NPI: 1992461230*


 *Provider English Spoken: Y*  
*Cultural Competency: N*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*


*IPA: IHP of Southern Cal-PHP*

### **CERTIFIED NURSE PRACTITIONER**

#### **HART, BECKY**

*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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Hospital Affiliation: SHARP

CORONADO HOSP AND  
HEALTHCARE CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM

 Website: N/A

IPA: Community Care IPA LLC

### CERTIFIED NURSE PRACTITIONER


**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






了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## D. 专家名录

<p> 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</p>	<p>CHULA VISTA          Medi-Cal Open Panel: Yes          Min/Max Age: 14\None          American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M 8:30AM-5:30PM          TU 8:30AM-8:30PM          W 8:30AM-5:30PM          TH 8:30AM-8:30PM          F 8:30AM-5:30PM          SA 9AM-4PM   Website: N/A          IPA: IHP of Southern Cal-PHP</p>	<p>CHULA VISTA          Medi-Cal Open Panel: Yes          Min/Max Age: 14\None          American Sign Language (ASL): N   Accessibility: CONTACT PROVIDER   Hours: M 8:30AM-5:30PM          TU 8:30AM-8:30PM          W 8:30AM-5:30PM          TH 8:30AM-8:30PM          F 8:30AM-5:30PM          SA 9AM-4PM   Website: N/A          IPA: IHP of Southern Cal-PHP</p>
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### 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

### 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

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER


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#### **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

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### CERTIFIED NURSE PRACTITIONER


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#### **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

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### CERTIFIED NURSE PRACTITIONER


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#### **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

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### CERTIFIED NURSE PRACTITIONER


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#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*


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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **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*

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### **CERTIFIED NURSE** **PRACTITIONER**




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#### **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*



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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **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: 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **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*

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### **CERTIFIED NURSE** **PRACTITIONER**

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#### **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*

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### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: 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

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### CERTIFIED NURSE

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### 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, GRETTEL 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

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### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


---

**MICK, SHARON**

Provider ID: 299649

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1891061966

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **CERTIFIED NURSE PRACTITIONER**

---


**MICK, SHARON**

Provider ID: 299648

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

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

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### **CERTIFIED NURSE PRACTITIONER**

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**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

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### **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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

200-2426  
Provider Gender: Female  
NPI: 1952925851  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Tagalog  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU  
8:30AM-5:30PM  
W 10AM-7PM  
TH-F 8:30AM-5:30PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **CERTIFIED NURSE PRACTITIONER**

**MILLER, EVA**  
Provider ID: 255833  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (619) 471-9210  
 After Hours Phone: (619)  
471-9210  
Provider Gender: Female  
NPI: 1043492523  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **CERTIFIED NURSE PRACTITIONER**

**MOHEBBI, ATHENA**  
Provider ID: 201325  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **CERTIFIED NURSE PRACTITIONER**


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**NOVENO, HILARIO JR**

Provider ID: 286912

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273


Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1124486865

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: 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

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### **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

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### **CERTIFIED NURSE PRACTITIONER**


---

**O'CONNELL, STEFANY**


Provider ID: 296846

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 1016 OUTER RD  
SAN DIEGO, CA 92154

 Phone: (619) 429-3733

Fax: (619) 628-5550

 After Hours Phone: (619)  
429-3733

Provider Gender: Female

NPI: 1386378479

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE PRACTITIONER**


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**OREJEL, EDITH**

Provider ID: 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录







*Spoken: Spanish*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M 8:30AM-5:30PM  
TU 5:30PM-8:30PM  
W 8:30AM-5:30PM  
TH 5:30PM-8:30PM  
F 8:30AM-5:30PM  
SA 9AM-4PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### CERTIFIED NURSE PRACTITIONER








**OREJEL, EDITH**  
*Provider ID: 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  
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

**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

**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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (858) 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

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#### **PEREZ, ALLYSSA**

Provider ID: 286222

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1497358915

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

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### CERTIFIED NURSE PRACTITIONER

---

#### **PEREZ, ALLYSSA**

Provider ID: 304162

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 6655 ALVARADO RD  
SAN DIEGO, CA 92120

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1497358915

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

---

### CERTIFIED NURSE PRACTITIONER

---

#### **PEREZ, ALLYSSA**

Provider ID: 286223

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1497358915

🗣 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

---

### **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

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### **CERTIFIED NURSE PRACTITIONER**

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**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录








 Website: N/A  
IPA: 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

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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **ROBERTSON, RACHAEL**

Provider ID: 286940

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1659912327


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group

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### **CERTIFIED NURSE** **PRACTITIONER**


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#### **RODENMEYER, EVE**

Provider ID: 295956  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4305 UNIVERSITY AVE STE  
150

SAN DIEGO, CA 92105

 Phone: (619) 280-2058  
Fax: (858) 633-4682

 After Hours Phone: (619) 280-2058

Provider Gender: Female  
NPI: 1225782022

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: IHP of Southern Cal-PHP

---


### **CERTIFIED NURSE** **PRACTITIONER**


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#### **ROSCOE, SYDNEY**

Provider ID: 305039  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1992448864

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **ROSCOE, SYDNEY**


Provider ID: 305037

Board Certified Specialty: No

UCSD MEDICAL GROUP

 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female


NPI: 1992448864

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **ROSCOE, SYDNEY**

Provider ID: 305038

Board Certified Specialty: No

UCSD MEDICAL GROUP

 350 DICKINSON ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1992448864


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

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### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **ROSS, CRYSTAL**

Provider ID: 287763

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 350 DICKINSON ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1548683378

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, GROSSMONT


HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

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### **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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM  
SA 8AM-2PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group*

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**CERTIFIED NURSE  
PRACTITIONER**



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**ROSSI, CATHERINE**

*Provider ID: 291445*  
*Board Certified Specialty: No  
UCSD MEDICAL GROUP*  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*  
*NPI: 1649934126*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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**CERTIFIED NURSE  
PRACTITIONER**


---

**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*

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**CERTIFIED NURSE  
PRACTITIONER**

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**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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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### CERTIFIED NURSE PRACTITIONER

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#### **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

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### CERTIFIED NURSE PRACTITIONER


---


#### **SANACORA, RACHEL**

Provider ID: 297728

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1548987985


 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network

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### 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

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### CERTIFIED NURSE PRACTITIONER


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#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 Website: N/A  
IPA: 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

 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **SEARS-WILEY, ELIZABETH**

Provider ID: 276851  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781


 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1215394382

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group

---

### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL): IPA: UCSD Medical Group

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### 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

---

### CERTIFIED NURSE PRACTITIONER


---

#### **SENA, TIFFANY**


Provider ID: 300229

Board Certified Specialty: No  
RADY CHILDRENS HEALTH

NETWORK

 550 WASHINGTON ST STE  
300

SAN DIEGO, CA 92103



 Phone: (619) 297-5437

Fax: (619) 297-4567

 After Hours Phone: (619)  
297-5437

Provider Gender: Female

NPI: 1710539523

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL


Medi-Cal Open Panel: No

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### CERTIFIED NURSE

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### 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

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### 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation:*  
*UNIVERSITY OF CALIFORNIA*  
*IRVINE MED CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**


---

#### **TALBOT, ADRIANNE**

*Provider ID: 278183*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 *4168 FRONT ST STE 1A*  
*SAN DIEGO, CA 92103*

 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800)*  
*926-8273*

*Provider Gender: Female*

*NPI: 1992048557*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD LA*  
*JOLLA JOHN SALLY*


*THORNTON, UCSD MEDICAL*  
*CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **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*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **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

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### **CERTIFIED NURSE** **PRACTITIONER**

---


#### **VIBAL-POASTER, MARIA**


Provider ID: 205651

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1376046680


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### **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**


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#### **WHITEHURST, UNIQUE**

Provider ID: 306075

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 286 EUCLID AVE STE 302  
SAN DIEGO, CA 92114

 Phone: (619) 662-4100  
Fax: (619) 428-7952

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1124800214

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

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#### **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**

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#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Imperial Health Holdings  
Medical Group-SD

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**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

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**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

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**CERTIFIED REGISTERED  
NURSE ANESTHETIST**

---

**BURROWS, TERENCE**

Provider ID: 256694

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1023194560

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<hr/> <b>CERTIFIED REGISTERED NURSE ANESTHETIST</b> <hr/> <b>DOLLAND, STEVEN</b> 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	<i>Board Certified Specialty: No</i> UCSD MEDICAL GROUP 📍 200 W 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	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
<hr/> <b>CERTIFIED REGISTERED NURSE ANESTHETIST</b> <hr/> <b>FERRITER, STACY</b> Provider ID: 265295	<hr/> <b>CERTIFIED REGISTERED NURSE ANESTHETIST</b> <hr/> <b>GARCIA, CALVIN</b> 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)	<hr/> <b>CERTIFIED REGISTERED NURSE ANESTHETIST</b> <hr/> <b>GONZALEZ, LISA</b> 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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED REGISTERED NURSE ANESTHETIST**

#### **POLIKOWSKI, SAMANTHA**

*Provider ID: 291444*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1194134114*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: KAISER  
FOUNDATION HOSPITAL SAN  
DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED REGISTERED**

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### **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):*

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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---

**CHOI, NATHALIE**

*Provider ID: 301715*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*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: 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**


---

**EKHOLM, JANNA**

*Provider ID: 290584*

*Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP*

 4290 POLK AVE  
SAN DIEGO, CA 92105

 *Phone: (619) 563-0250*

*Fax: (858) 633-4681*

 *After Hours Phone: (619)  
563-0250*

*Provider Gender: Female*

*NPI: 1588977151*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: UCSD  
MEDICAL CTR*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: IHP of Southern Cal-PHP*

---

### **CERTIFIED REGISTERED NURSE MIDWIFE**

---


**GOODWIN, RACHEL**

*Provider ID: 210018*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 4168 FRONT ST  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1518274919*

 *Provider English Spoken: Y*

 *Provider Language(s)  
Spoken: Spanish*

*Cultural Competency: N*

*Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY*

*THORNTON, UCSD MEDICAL*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED  
NURSE MIDWIFE**

---

**GOODWIN, RACHEL**

Provider ID: 210019


Board Certified Specialty: No

UCSD MEDICAL GROUP

 16950 VIA TAZON


SAN DIEGO, CA 92127

 Phone: (800) 926-8273

 After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1518274919

 Provider English Spoken: Y

 Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None


American Sign Language (ASL):

N

 Accessibility: CONTACT

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

**CERTIFIED REGISTERED  
NURSE MIDWIFE**

---

**GREAR MANN, MELISSA**


Provider ID: 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**

---

**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**

---

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

---

**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*

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**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*

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**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: 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*

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**CERTIFIED REGISTERED**

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## D. 专家名录

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**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

---

**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 9AM-6PM  
W 9AM-6PM  
F 9AM-2PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD

---

**CHIROPRACTOR**

**BUI, MAI**  
Provider ID: 125052  
Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS MEDICAL GROUP-SD  
5354 UNIVERSITY AVE STE 3  
SAN DIEGO, CA 92105  
Phone: (619) 692-3211  
Fax: (619) 640-3211  
After Hours Phone: (619) 692-3211  
Provider Gender: Female  
NPI: 1780901264  
Provider English Spoken: Y  
Provider Language(s) Spoken: Vietnamese  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD

---


**CHIROPRACTOR**

**BUI, MAI**  
Provider ID: 295791  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
5354 UNIVERSITY AVE STE 3  
SAN DIEGO, CA 92105  
Phone: (619) 692-3211  
Fax: (619) 640-3211  
After Hours Phone: (619) 692-3211  
Provider Gender: Female  
NPI: 1780901264  
Provider English Spoken: Y  
Provider Language(s) Spoken: Vietnamese  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 9AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Imperial Health Holdings  
Medical Group-SD

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### 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

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## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CHIROPRACTOR

#### ROBINSON, DEAN


Provider ID: 300848  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 4290 POLK AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 563-0250  
Fax: (858) 633-4681  
 After Hours Phone: (619)  
563-0250  
Provider Gender: Male  
NPI: 1851320337  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F  
8:30AM-5:30PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### CHIROPRACTOR

#### ROBINSON, DEAN


Provider ID: 300847  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6973 LINDA VISTA RD

SAN DIEGO, CA 92111


 Phone: (858) 279-0925  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
279-0925

Provider Gender: Male

NPI: 1851320337

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F  
8:30AM-5:30PM

 Website: N/A

IPA: IHP of Southern Cal-PHP



### DERMATOLOGY




#### CALAME, ANTOANELLA

Provider ID: 290301  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 6605 NANCY RIDGE DR  
SAN DIEGO, CA 92121  
 Phone: (858) 750-2983  
Fax: (858) 750-2984  
 After Hours Phone: (858)  
750-2983

Provider Gender: Female




NPI: 1285817569

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Romanian  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS

MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, YUMA  
REGIONAL MEDICAL CENTER  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### DERMATOLOGY

#### DANG, TIMOTHY

Provider ID: 309721  
Board Certified 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

 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

### DERMATOLOGY


#### **KOZMA, BONITA**

Provider ID: 269301


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN STE 350

SAN DIEGO, CA 92122


 Phone: (858) 657-8322

Fax: (888) 539-8781

 After Hours Phone: (858)  
657-8322

Provider Gender: Female

NPI: 1659654598

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation:  
PROVIDENCE SAINT JOHNS

HEALTH CENTER, SANTA  
MONICA UCLA MED CTR,

RONALD REAGAN UCLA MED  
CTR, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY  
THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### DERMATOLOGY

#### **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

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## D. 专家名录

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

#### **LIU, YUJIE**

Provider ID: 308315

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1750944450

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### DERMATOLOGY

#### **SHI, VERONICA**


Provider ID: 271713

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN STE 350  
SAN DIEGO, CA 92122

 Phone: (858) 657-8322

Fax: (888) 539-8781

 After Hours Phone: (858)  
657-8322

Provider Gender: Female

NPI: 1366897464

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### DERMATOLOGY

#### **SHI, VERONICA**

Provider ID: 286335

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON

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## D. 专家名录

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

**SINGH, GAURAV**  
Provider ID: 272612  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 8899 UNIVERSITY CENTER  
LN STE 350  
SAN DIEGO, CA 92122  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1184073801

☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### 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


**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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273


Provider Gender: Male  
NPI: 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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### 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: 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

**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


**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Provider Gender: Female  
NPI: 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**

#### **CASTELLANO, TIFFANY**

Provider ID: 301706

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1063893063

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **CASTELLANO, TIFFANY**

Provider ID: 279314


Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1063893063


 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **EMERGENCY MEDICINE**

#### **CHEN, ALICE**

Provider ID: 287430

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 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

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

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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group



### EMERGENCY MEDICINE

#### HERNANDEZ, CRISTINA

Provider ID: 242544  
Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273



Provider Gender: Female  
NPI: 1164765046

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### EMERGENCY MEDICINE


#### HOGUE, BRENNIA

Provider ID: 301711  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1043705296

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A  
IPA: UCSD Medical Group


### EMERGENCY MEDICINE

#### HORNBEAK, KIRSTEN

Provider ID: 240022  
Board Certified Specialty: No  
UCSD MEDICAL GROUP



 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273

Provider Gender: Female  
NPI: 1205214442

 Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N



 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### EMERGENCY MEDICINE

#### KUTZ, CRAIG

Provider ID: 283845  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):  Website: N/A  
IPA: UCSD Medical Group

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**

#### **LIOTTA, BENJAMIN**

Provider ID: 285630

Board Certified Specialty: No  
UCSD MEDICAL GROUP


 16950 VIA TAZON  
SAN DIEGO, CA 92127


 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1396270278

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Chinese

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-8PM

 Website: N/A  
IPA: UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **MCDANIEL, MICHELE**

Provider ID: 246901

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1366761959

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MERCY HOSPITAL,

SOUTHWEST HEALTHCARE

INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL

SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group


### **EMERGENCY MEDICINE**


#### **NOSTE, ERIN**

Provider ID: 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**

#### **NOSTE, ERIN**







Provider ID: 239797

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

 Phone: (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**





#### **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: 304937  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

SA 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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: 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

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### 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

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### 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

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### 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




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## D. 专家名录

 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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### 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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider ID: 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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


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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Male

NPI: 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

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### FAMILY PRACTICE


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#### 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):  Website: N/A

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


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#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### UCSD MEDICAL GROUP

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## D. 专家名录

<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>JOHN, TANNER</b> 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	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	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>JOLICOEUR, MEGAN</b> 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
<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>JOLICOEUR, MEGAN</b> 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)	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>JOLICOEUR, MEGAN</b> 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	<hr/> <b>FAMILY PRACTICE</b> <hr/> <b>JOLICOEUR, MEGAN</b> 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-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**

#### **KUROSACA, 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**




#### **KUROSACA, MOMO**


Provider ID: 291447  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 8899 UNIVERSITY CENTER  
LN  
SAN DIEGO, CA 92122  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1205848363




 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **FAMILY PRACTICE**

#### **MCLAUGHLIN, ERIK**




Provider ID: 303847  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 2630 1ST AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 234-2158  
Fax: (619) 234-0505  
 After Hours Phone: (619)  
234-2158  
Provider Gender: Male  
NPI: 1861637217

 Provider English Spoken: Y





Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

#### **PERESS, LILIA**


Provider ID: 304276  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
Fax: (858) 633-4680  
 After Hours Phone: (858)  
810-8700

Provider Gender: Female  
NPI: 1275945446

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Ukrainian  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **FAMILY PRACTICE**


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#### **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

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### **FAMILY PRACTICE**


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#### **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

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### **FAMILY PRACTICE**

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#### **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

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### **FAMILY PRACTICE**

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#### **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

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### **FAMILY PRACTICE**

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#### **SCOTT, LAGINA**

Provider ID: 302648

Board Certified Specialty: No

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## D. 专家名录

### 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

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **FAMILY PRACTICE**

#### **VO, PHULUONG**

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

### **FAMILY PRACTICE GERIATRIC MEDICINE**

#### **MILLER, SCOTT**

Provider ID: 271539

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## D. 专家名录

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

9878 CARMEL MOUNTAIN  
RD STE B

SAN DIEGO, CA 92129

Phone: (858) 312-1440

Fax: (760) 788-7983

After Hours Phone: (858)  
312-1440

Provider Gender: Male

NPI: 1104845536

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

### **FEMALE PELVIC MED AND RECONSTRUCTIVE SURG**

**LUKACZ, EMILY**

Provider ID: 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: 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**

**ANAND, GOBIND**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 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**

#### **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**

#### **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

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## D. 专家名录

SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 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

### 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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。








## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

### GASTROENTEROLOGY









#### **POLK, DAVID**

*Provider ID: 275449*  
*Board Certified Specialty: No*  
**RADY CHILDRENS HEALTH NETWORK**  
 3030 CHILDRENS WAY FL 2  
 SAN DIEGO, CA 92123  
 *Phone: (760) 294-9260*  
*Fax: (760) 294-9274*  
 *After Hours Phone: (760) 294-9260*  
*Provider Gender: Male*  
*NPI: 1427140839*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, CHILDRENS HOSP OF LOS ANGELES*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health*

Network









### GASTROENTEROLOGY

#### **REDDY, JOSEPH**

*Provider ID: 27748*  
*Board Certified Specialty: Yes*  
**ADVANCED ENDOSCOPY CONSULTANTS INC**  
 6699 ALVARADO RD STE 2301  
 SAN DIEGO, CA 92120  
 *Phone: (619) 599-4074*  
*Fax: (619) 588-4004*  
 *After Hours Phone: (619) 599-4074*  
*Provider Gender: Male*  
*NPI: 1245215391*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Hindi, Spanish, Telugu*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD*

### GASTROENTEROLOGY

#### **REDDY, JOSEPH**

*Provider ID: 290034*  
*Board Certified Specialty: Yes*  
**IHP OF SOUTHERN CAL-PHP**  
 6699 ALVARADO RD STE 2301  
 SAN DIEGO, CA 92120  
 *Phone: (619) 599-4074*  
*Fax: (619) 588-4004*  
 *After Hours Phone: (619) 599-4074*  
*Provider Gender: Male*  
*NPI: 1245215391*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Hindi, Spanish, Telugu*  
*Cultural Competency: N*  
*Hospital Affiliation: GROSSMONT HOSPITAL, UCSD MEDICAL CTR*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 18\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP, Imperial Health Holdings Medical Group-SD*

### GASTROENTEROLOGY

#### **SHAFFER, KATHERINE**

*Provider ID: 295712*

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## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

292 EUCLID AVE STE 115  
SAN DIEGO, CA 92114

Phone: (619) 266-3332

Fax: (619) 266-6006

After Hours Phone: (619)  
266-3332

Provider Gender: Female

NPI: 1336405695

Provider English Spoken: Y  
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 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<hr/> <b>GASTROENTEROLOGY</b> <hr/> <b>YOUSSEF, FADY</b> 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	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	PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network
<hr/> <b>GASTROENTEROLOGY</b> <hr/> <b>YOUSSEF, FADY</b> 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	<hr/> <b>GENETICS CLINICAL</b> <hr/> <b>REIMERS, REBECCA</b> 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: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER	<hr/> <b>GENETICS CLINICAL</b> <hr/> <b>REIMERS, REBECCA</b> 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
	<hr/> <b>GENETICS MEDICAL</b> <hr/>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **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): American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### **GENETICS MEDICAL**

### **NIEMI, ANNA-KAISA**

Provider ID: 307094

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 7920 FROST ST STE 200  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5840  
Fax: (858) 966-8550

🕒 After Hours Phone: (858)  
966-5840

Provider Gender: Female

NPI: 1497941397

🗣 Provider English Spoken: Y

🗣 Provider Language(s)  
Spoken: Finnish, French,  
German, Spanish, Swedish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### **HEARING AID DEALER / SUPPLIER**

### **ANDERSON, ELAINE**

Provider ID: 268691

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 9340 CLAIREMONT MESA  
BLVD STE D  
SAN DIEGO, CA 92123

☎ Phone: (858) 278-9911  
Fax: (858) 565-7324

🕒 After Hours Phone: (858)  
278-9911

Provider Gender: Female

NPI: 1063558856

🗣 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### **HEARING AID DEALER / SUPPLIER**

### **ANDERSON, ELAINE**

Provider ID: 268689

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 6367 ALVARADO CT STE  
101  
SAN DIEGO, CA 92120

☎ Phone: (619) 583-7002  
Fax: (619) 583-9404

🕒 After Hours Phone: (619)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

583-7002

Provider Gender: Female

NPI: 1063558856

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

### HEARING AID DEALER / SUPPLIER

---

#### **DAVIS, KELLE**

Provider ID: 268652

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

6367 ALVARADO CT STE  
101

SAN DIEGO, CA 92120

Phone: (619) 583-7002

Fax: (619) 583-9404

After Hours Phone: (619)  
583-7002

Provider Gender: Female

NPI: 1902853344

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

#### **PROVIDER**

Hours: M-F 8:30AM-5PM

Website: N/A

IPA: Community Care IPA LLC

---

### HEARING AID DEALER / SUPPLIER

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#### **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

---

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

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DIEGO

Medi-Cal Open Panel: Yes

Min/Max 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

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## D. 专家名录

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**

#### **RUBENZI, TAMARA**

Provider ID: 276671

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group



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### **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

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### **HOSPITALIST MD/DO**

---

#### **SHINDO, YURI**



Provider ID: 284743  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1700271939

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS, UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **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

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### **INFECTIOUS DISEASE**

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#### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

American Sign Language (ASL): **DEISS, ROBERT**

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **INFECTIOUS DISEASE**


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**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

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### **INFECTIOUS DISEASE**


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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

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **INFECTIOUS DISEASE**

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**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

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### **INFECTIOUS DISEASE**

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**KUPPALLI, KRUTIKA**

Provider ID: 301058

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1538346317

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

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## D. 专家名录

MEDICAL CTR, Stanford Health  
Care, STANFORD HEALTH  
CARE TRI-VALLEY

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### 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

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### 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

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### 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

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### 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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**

#### **RAMIREZSANCHEZ, 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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### 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

---

### INTERNAL MEDICINE

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#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8:30AM-5:30PM  
TU 8:30AM-8:30PM  
W-F 8:30AM-5:30PM  
SA 9AM-4PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **INTERNAL MEDICINE**

#### **BORDIN-WOSK, TALYA**

Provider ID: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 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):*

♿ *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):*

♿ *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*

*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*


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## D. 专家名录

 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

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## D. 专家名录

### 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

### 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

### 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

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

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## D. 专家名录



### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### MARTINEZ, ARMANDO

Provider ID: 291421  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1598261091

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### MUNCE, DANIELLE

Provider ID: 272577  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1740644509

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY


THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM



 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### NOKES, BRANDON

Provider ID: 287582  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
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

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## D. 专家名录

 *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**


#### **SMITH, CHELSEY**

*Provider ID: 239920*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*



 4168 FRONT ST  
SAN DIEGO, CA 92103

 *Phone: (858) 657-6110*

 *After Hours Phone: (858) 657-6110*

*Provider Gender: Female*

*NPI: 1013264506*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Spanish*

*Cultural Competency: N*


*Hospital Affiliation: UCSD MEDICAL CTR*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **INTERNAL MEDICINE**

#### **TANTISIRA, LALITA**

*Provider ID: 275927*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1508874298*

 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Thai*


*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 18\None*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*


### **INTERNAL MEDICINE**

#### **TANTISIRA, LALITA**

*Provider ID: 275926*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

*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*


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### 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: 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


---


**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### INTERNAL MEDICINE


---

#### WEBSTER, LUKE

Provider ID: 272681

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1235660887

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### INTERNAL MEDICINE

---

#### YANG, JENNY

Provider ID: 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

---


#### 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


---

#### ZHANG, SHERRY

Provider ID: 272657

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

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## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1588198147

☐ Provider English Spoken: Y

☐ Provider Language(s) Spoken: Mandarin

Cultural Competency: N

Hospital Affiliation: UCSD LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### CRITICAL CARE MEDICINE

**BEGOVIC, ADNAN**

Provider ID: 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: 276291

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR STE  
3-313

SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1093791014

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, SOUTHWEST  
HEALTHCARE INLAND

VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL

HOSPITAL, UCSD LA JOLLA  
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

#### CRITICAL CARE MEDICINE

**BEGOVIC, ADNAN**

Provider ID: 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






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## D. 专家名录

*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: 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: 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: 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


### MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE


### ODISH, MAZEN

Provider ID: 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: 271467

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST

SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1992141428

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

### ODISH, MAZEN

Provider ID: 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):

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE

### CRITICAL CARE MEDICINE

### TRAN, LINH

Provider ID: 271939

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR

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## D. 专家名录

SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Female  
NPI: 1851682728  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### INTERNAL MEDICINE GERIATRIC MEDICINE

**AGNIHOTRI, PARAG**  
Provider ID: 247292  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male

NPI: 1447351085  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: MERCY GENERAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### INTERVENTIONAL CARDIOLOGY

**CRUZ RODRIGUEZ, JOSE**  
Provider ID: 300061  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1457770240  
☐ Provider English Spoken: Y  
☐ Provider Language(s) Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: PIONEERS MEMORIAL HOSPITAL, EL CENTRO REGIONAL MEDICAL CENTER

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### INTERVENTIONAL CARDIOLOGY



**KINGDON, TYLER**  
Provider ID: 301814  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5855  
Fax: (858) 966-7903  
📞 After Hours Phone: (858) 966-5855  
Provider Gender: Male  
NPI: 1477084283  
☐ Provider English Spoken: Y  
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

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## D. 专家名录

### PROVIDER



 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### INTERVENTIONAL CARDIOLOGY

#### MOHAMEDALI, BURHAN

Provider ID: 245577  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 292 EUCLID AVE STE 210  
SAN DIEGO, CA 92114  
 Phone: (619) 616-2100  
Fax: (619) 616-2104  
 After Hours Phone: (619) 616-2100  
Provider Gender: Male  
NPI: 1831393289  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish, Swahili  
Cultural Competency: N  
Hospital Affiliation: SHARP  
CHULA VISTA MED CTR,  
Adventist Health and Rideout  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):



N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC



### INTERVENTIONAL CARDIOLOGY

#### 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, ALVARADO  
HOSPITAL LLC, SHARP CHULA  
VISTA MED CTR, TRI CITY  
MEDICAL CTR, TRI CITY  
MEDICAL CTR, SCRIPPS  
MERCY HOSPITAL CHULA  
VISTA, Sharp Grossmont  
Hospital, SHARP CORONADO  
HOSP AND HEALTHCARE CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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: 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: 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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


Medi-Cal Open Panel: Yes

Min/Max Age: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800) 926-8273

Provider Gender: 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: 210034

Board Certified Specialty: No

RADY CHILDRENS HEALTH

NETWORK

📍 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-6710

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

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  
 N  
 ♿ Accessibility: CONTACT PROVIDER  
 🕒 Hours: M-F 8AM-5PM  
 🌐 Website: N/A  
 IPA: Rady Childrens Health Network

☎ 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

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

**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

### 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

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female  
 NPI: 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

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

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

### 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

### MATERNAL AND FETAL MEDICINE

#### MELBER, DORA

Provider ID: 296989  
 Board Certified Specialty: No  
 RADY CHILDRENS HEALTH  
 NETWORK

7910 FROST ST STE 430  
 SAN DIEGO, CA 92123

Phone: (858) 966-6710  
 Fax: (858) 966-6711

After Hours Phone: (858)  
 966-6710

Provider Gender: Female  
 NPI: 1124413026

Provider English Spoken: Y


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## D. 专家名录

MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### MATERNAL AND FETAL MEDICINE

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#### **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): Network

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### MATERNAL AND FETAL MEDICINE


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#### **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

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

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### MATERNAL AND FETAL MEDICINE

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#### **RICHARDSON, ALVIE**

Provider ID: 214436

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3003 HEALTH CENTER DR

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 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

### 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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

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

#### **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: 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

#### **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

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## D. 专家名录

---

Fax: (858) 966-6711

 After Hours Phone: (858) 966-6710


Provider Gender: Female

NPI: 1760730758

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MARY BIRCH HOSP FOR  
WOMEN AND NEWBORNS,  
EARL AND LORRAINE MILLER  
CHILDRENS HSP, LONG  
BEACH MEMORIAL MED CTR,  
UNIVERSITY OF CALIFORNIA  
IRVINE MED CTR, SHARP  
MEMORIAL HOSPITAL,  
GROSSMONT HOSPITAL,  
Sharp Grossmont Hospital,  
Sharp Grossmont Hospital  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### MATERNAL AND FETAL MEDICINE

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#### **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

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### MATERNAL AND FETAL MEDICINE


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#### **WILLIAMS, KRISTIN**

Provider ID: 277387

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3003 HEALTH CENTER DR  
SAN DIEGO, CA 92123

 Phone: (858) 966-6710

Fax: (858) 966-6711

 After Hours Phone: (858)  
966-6710

Provider Gender: Female


NPI: 1992847131


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
SAN MATEO MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, TRI CITY  
MEDICAL CTR, CALIFORNIA  
PACIFIC MED CTR,  
CALIFORNIA PACIFIC MED  
CTR, RADY CHILDRENS  
HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Rady Childrens Health Network

### **MATERNAL AND FETAL MEDICINE**

#### **WILLIAMS, KRISTIN**

Provider ID: 277383

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-6710

Fax: (858) 966-6711

After Hours Phone: (858) 966-6710

Provider Gender: Female

NPI: 1992847131

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Stanford Health Care, LUCILE SALTER PACKARD CHILDRENS HOSP, SAN MATEO MEDICAL CTR, SHARP MEMORIAL HOSPITAL, SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS, TRI CITY MEDICAL CTR, CALIFORNIA PACIFIC MED CTR, CALIFORNIA PACIFIC MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Rady Childrens Health  
Network


### 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)


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## D. 专家名录






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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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




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### **NEONATAL / PERINATAL MEDICINE**


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#### **LANE, BRIAN**

Provider ID: 205707  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5818  
Fax: (858) 966-7483  
 After Hours Phone: (858)

966-5818  
Provider Gender: Male  
NPI: 1427129287  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SCRIPPS MEMORIAL HOSPITAL, SHARP CHULA VISTA MED CTR, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MERCY HOSPITAL, SCRIPPS MERCY HOSPITAL CHULA VISTA  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

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### **NEONATAL / PERINATAL MEDICINE**

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#### **LE, CRYSTAL**



Provider ID: 205630  
Board Certified Specialty: No

#### **RADY CHILDRENS HEALTH NETWORK**

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5818  
Fax: (858) 966-7483  
 After Hours Phone: (858) 966-5818

Provider Gender: Female  
NPI: 1003028416  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: Rady Childrens Health Network

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### **NEONATAL / PERINATAL MEDICINE**

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## D. 专家名录

### **MARC-AURELE, KRISHELLE**

Provider ID: 206206  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (619) 543-3812

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

Provider ID: 206208

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5818

Fax: (858) 966-7483

After Hours Phone: (858)  
966-5818

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

Phone: (858) 966-8022

Fax: (858) 966-8457

After Hours Phone: (858)  
966-8022

Provider Gender: Female

NPI: 1952503435

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network, UCSD Medical Group

### NEONATAL / PERINATAL MEDICINE

**MARC-AURELE, KRISHELLE**

### NEONATAL / PERINATAL MEDICINE

**MARC-AURELE, KRISHELLE**

Provider ID: 206210

### NEONATAL / PERINATAL MEDICINE

**MATOBA, NANA**

Provider ID: 297974

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## D. 专家名录

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: 299894

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY

SAN DIEGO, CA 92123

Phone: (858) 966-5888  
Fax: (858) 966-7483

After Hours Phone: (858)  
966-5888

Provider Gender: Female  
NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **MATOBA, NANA**

Provider ID: 297975

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

4077 5TH AVE

SAN DIEGO, CA 92103

Phone: (619) 260-7046  
Fax: (619) 686-3843

After Hours Phone: (619)

260-7046

Provider Gender: Female  
NPI: 1801952197

Provider English Spoken: Y

Provider Language(s)  
Spoken: Japanese

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **MCCULLEY, DAVID**

Provider ID: 277177

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5818  
Fax: (858) 966-7483

After Hours Phone: (858)  
966-5818

Provider Gender: Male

NPI: 1235304155

Provider English Spoken: Y


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## D. 专家名录

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


#### **MESTAN, KAREN**

Provider ID: 285932

Board Certified Specialty: No  
 RADY CHILDRENS HEALTH NETWORK


 3010 CHILDRENS WAY FL 3  
 SAN DIEGO, CA 92123

 Phone: (858) 966-5888

 After Hours Phone: (858)  
 966-5888

Provider Gender: Female

NPI: 1942253356

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY  
 CHILDRENS HOSPITAL SAN  
 DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):  
 N

 Accessibility: CONTACT

#### PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
 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

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 至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **RAMOS, CARLOS**

Provider ID: 206060

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (619) 543-3759  
Fax: (619) 543-3812

📞 After Hours Phone: (619)  
543-3759

Provider Gender: Male

NPI: 1205047545

🗉 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, EL CENTRO  
REGIONAL MEDICAL CENTER,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO, UCSD LA JOLLA  
JOHN SALLY THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **SAJTI, ENIKO**

Provider ID: 206171

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (619) 543-3759  
Fax: (619) 543-3812

📞 After Hours Phone: (619)  
543-3759

Provider Gender: Female

NPI: 1649433103

🗉 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF  
BENIOFF CHILDREN'S  
HOSPITAL OAKLAND, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### **SAUER, CHARLES**

Provider ID: 303906

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 4077 5TH AVE  
SAN DIEGO, CA 92103

☎ Phone: (619) 260-7046

📞 After Hours Phone: (619)  
260-7046

Provider Gender: Male

NPI: 1538388988

🗉 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, SCRIPPS MEMORIAL  
HOSPITAL ENCINITAS,  
PALOMAR MEDICAL CENTER,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, PALOMAR  
HEALTH, SCRIPPS MEMORIAL  
HOSPITAL, SOUTHWEST  
HEALTHCARE RANCHO  
SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL




Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### 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

#### **SONG, RICHARD**

*Provider ID: 206143*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*


 3020 CHILDRENS WAY  
 SAN DIEGO, CA 92123

 *Phone: (858) 966-5818*  
*Fax: (858) 966-7483*




 *After Hours Phone: (858) 966-5818*

*Provider Gender: Male*

*NPI: 1881893477*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL,*

*SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL):*  
*N*


 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

### 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*

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## D. 专家名录

*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*

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### **NEONATAL / PERINATAL MEDICINE**

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**SUTTNER, DENISE**  
*Provider ID: 265085*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5818*  
*Fax: (858) 966-7483*  
 *After Hours Phone: (858) 966-5818*  
*Provider Gender: Female*  
*NPI: 1457433799*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SCRIPPS MERCY HOSPITAL CHULA VISTA, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MERCY HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*

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### **NEONATAL / PERINATAL MEDICINE**

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**SWEENEY, NATHALY**  
*Provider ID: 206182*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-5818*  
*Fax: (858) 966-7483*  
 *After Hours Phone: (858) 966-5818*  
*Provider Gender: Female*  
*NPI: 1164572632*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR MEDICAL CENTER*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

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### **NEONATAL / PERINATAL MEDICINE**

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**VOLLER, STEPHANNIE**  
*Provider ID: 303808*  
*Board Certified Specialty: No*

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## D. 专家名录

### 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: 1417121971

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### VOLLER, STEPHANNIE

Provider ID: 303806

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5888  
Fax: (858) 966-7483

After Hours Phone: (858)  
966-5888

Provider Gender: Female

NPI: 1417121971

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### VOLLER, STEPHANNIE

Provider ID: 303807

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

8001 FROST ST  
SAN DIEGO, CA 92123

Phone: (858) 966-8052  
Fax: (858) 966-7789

After Hours Phone: (858)  
966-8052

Provider Gender: Female  
NPI: 1417121971

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

### NEONATAL / PERINATAL MEDICINE

#### WEISS, KATHERINE

Provider ID: 264677

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5818  
Fax: (858) 966-7483

After Hours Phone: (858)  
966-5818

Provider Gender: Female  
NPI: 1053541862

Provider English Spoken: Y  
Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): Network

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Rady Childrens Health Network, UCSD Medical Group


### NEONATAL / PERINATAL MEDICINE

#### **WEST, JULIE**


Provider ID: 297073

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3010 CHILDRENS WAY FL 3  
SAN DIEGO, CA 92123

 Phone: (858) 966-5888

Fax: (858) 249-5839

 After Hours Phone: (858)  
966-5888

Provider Gender: Female

NPI: 1811151848


 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health

Fax: (619) 263-9730

 After Hours Phone: (619)  
263-9729

Provider Gender: Male

NPI: 1093902496

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL, SCRIPPS

MERCY HOSPITAL CHULA

VISTA, RIVERSIDE


COMMUNITY HOSP

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### NEPHROLOGY

#### **SHAH, MITA**


Provider ID: 262230

Board Certified Specialty: No

IMPERIAL HEALTH HOLDINGS

MEDICAL GROUP-SD

 8010 FROST ST STE 510  
SAN DIEGO, CA 92123

 Phone: (858) 637-4700

Fax: (858) 637-4701

 After Hours Phone: (858)  
637-4700

Provider Gender: Female

### 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.c  
om


### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

NPI: 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

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### NEPHROLOGY


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#### 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

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### NEUROLOGY

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#### 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

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## D. 专家名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD*  
*MEDICAL CTR, UCSD LA*  
*JOLLA JOHN SALLY*  
*THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **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: 240949*  
*Board Certified Specialty: Yes*  
*UCSD MEDICAL GROUP*  
 4510 EXECUTIVE DR STE  
 325  
 SAN DIEGO, CA 92121  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800)*  
*926-8273*  
*Provider Gender: Male*  
*NPI: 1740543784*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **NEUROLOGY**

#### **COUGHLIN, DAVID**

*Provider ID: 240951*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 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: 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


**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

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## D. 专家名录

☎ 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  
IPA: Rady Childrens Health Network

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

#### FREDERICK, ALIYA

Provider ID: 283152

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 576-8412

☎ After Hours Phone: (858) 966-5999

Provider Gender: Female

NPI: 1548657992

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN

SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### NEUROLOGY

#### GOLD, JEFFREY

Provider ID: 283335

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5999

Fax: (858) 576-8412

☎ After Hours Phone: (858) 966-5999

Provider Gender: Male

NPI: 1568773984

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health Network

### NEUROLOGY

#### GOLD, JEFFREY

Provider ID: 303287

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 3030 CHILDRENS WAY FL  
4

SAN DIEGO, CA 92123

☎ Phone: (858) 966-5819

Fax: (858) 966-4930

☎ After Hours Phone: (858) 966-5819

Provider Gender: Male

NPI: 1568773984

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SHARP MEMORIAL HOSPITAL





























Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

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## D. 专家名录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Rady Childrens Health Network</i></p>	<p><i>Network</i></p> <hr/> <p style="text-align: center;"><b>NEUROLOGY</b></p> <hr/> <p><b>GUNDOGDU, MELEK</b></p> <p><i>Provider ID: 201623</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>UCSD MEDICAL GROUP</i></p>	<p><i>NETWORK</i></p> <p> 3020 CHILDRENS WAY SAN DIEGO, CA 92123</p> <p> <i>Phone: (858) 966-5999</i></p> <p><i>Fax: (858) 576-8412</i></p> <p> <i>After Hours Phone: (858) 966-5999</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1194179135</i></p>
<hr/> <p style="text-align: center;"><b>NEUROLOGY</b></p> <hr/> <p><b>GUIDO-ESTRADA, NATALIE</b></p> <p><i>Provider ID: 303271</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>RADY CHILDRENS HEALTH NETWORK</i></p> <p> 3030 CHILDRENS WAY FL 4 SAN DIEGO, CA 92123</p> <p> <i>Phone: (858) 966-5819</i></p> <p><i>Fax: (858) 966-4930</i></p> <p> <i>After Hours Phone: (858) 966-5819</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1528353521</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\19</i></p> <p><i>American Sign Language (ASL): N</i></p>	<p> 200 W ARBOR DR FL 1 SAN DIEGO, CA 92103</p> <p> <i>Phone: (619) 543-3500</i></p> <p> <i>After Hours Phone: (619) 543-3500</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1437253671</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Turkish</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>	<p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Arabic</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\19</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Rady Childrens Health Network</i></p>
<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: Rady Childrens Health</i></p>	<hr/> <p style="text-align: center;"><b>NEUROLOGY</b></p> <hr/> <p><b>HANNAWI, ANDREW</b></p> <p><i>Provider ID: 283154</i></p> <p><i>Board Certified Specialty: Yes</i></p> <p><i>RADY CHILDRENS HEALTH</i></p>	<hr/> <p style="text-align: center;"><b>NEUROLOGY</b></p> <hr/> <p><b>IRAGUIMADOZ, VICENTE</b></p> <p><i>Provider ID: 304154</i></p> <p><i>Board Certified Specialty: No</i></p> <p><i>UCSD MEDICAL GROUP</i></p> <p> 6655 ALVARADO RD SAN DIEGO, CA 92120</p> <p> <i>Phone: (800) 926-8273</i></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1053326710

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### NEUROLOGY

#### KHAMISHON, BORIS

Provider ID: 269923

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 6699 ALVARADO RD STE  
2301

SAN DIEGO, CA 92120

☎ Phone: (619) 582-2595

☎ After Hours Phone: (619)  
582-2595

Provider Gender: Male

NPI: 1104922038

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Russian

Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-TH 8AM-4PM  
F 8AM-3PM

🌐 Website: N/A

IPA: Community Care IPA LLC

### NEUROLOGY

#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Rady Childrens Health Network

### **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**

#### **LONGARDNER, KATHERINE**

Provider ID: 304197

Board Certified Specialty: No

UCSD MEDICAL GROUP

6655 ALVARADO RD  
SAN DIEGO, CA 92120

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1801215926

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **NEUROLOGY**

#### **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

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### 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

#### 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


#### 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

#### 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)



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## D. 专家名录

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

**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

**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

**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):


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

N

 **Accessibility: CONTACT PROVIDER**

 **Hours: M-F 8AM-5PM**

 **Website: N/A**

**IPA: Rady Childrens Health Network**


### **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: 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**

**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 CHILD**

**GRAVES, JENNIFER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): IHP OF SOUTHERN CAL-PHP  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

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### **NUCLEAR MEDICINE**


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#### **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

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### **OBSTETRICS / GYNECOLOGY**

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#### **ASLIAN, AZITA**

Provider ID: 308270


Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP  
 950 S EUCLID AVE

SAN DIEGO, CA 92114


 Phone: (619) 662-4100


Fax: (619) 662-4158

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **OBSTETRICS / GYNECOLOGY**

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#### **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

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### **OBSTETRICS / GYNECOLOGY**

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#### **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

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## D. 专家名录

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: 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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**


#### **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): UCSD MEDICAL GROUP

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): UCSD MEDICAL GROUP

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): UCSD MEDICAL GROUP

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): UCSD MEDICAL GROUP

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: UCSD Medical Group

### **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**

#### **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: 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**

#### **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**

#### **GUPTA, PRATIMA**

Provider ID: 257548

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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**

#### **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**

#### **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**

#### **HARVEY, SCOTT**

Provider ID: 278915

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1457662868

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **HOANG, MAI**

Provider ID: 208294  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4168 FRONT ST  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1104143593

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **HOM-TEDLA, MARIANNE**

Provider ID: 242751  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1972047397

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
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: 271561  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 6030 VILLAGE WAY  
SAN DIEGO, CA 92130  
📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)

926-8273  
Provider Gender: Male  
NPI: 1780073635

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON  
Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

Hospital 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):  Accessibility: CONTACT  
PROVIDER

 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: 208681



Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4910 DIRECTORS PL STE  
200  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1396904876


 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, EISENHOWER MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **OBSTETRICS / GYNECOLOGY**

#### **LAMALE-SMITH, LEAH**

Provider ID: 285519

Board Certified Specialty: No  
UCSD MEDICAL GROUP



 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1396904876

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, EISENHOWER MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### **OBSTETRICS / GYNECOLOGY**

#### **MACKAY, GILLIAN**

Provider ID: 200965

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MACKAY, GILLIAN**

Provider ID: 303064

Board Certified Specialty: No  
UCSD MEDICAL GROUP

6030 VILLAGE WAY  
SAN DIEGO, CA 92130

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1770702177

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **MANI, PARVIN**

Provider ID: 242345

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

5555 RESERVOIR DR STE  
208

SAN DIEGO, CA 92120

Phone: (619) 583-7555

Fax: (619) 583-0555

After Hours Phone: (619)  
583-7555

Provider Gender: Female

NPI: 1518925015

Provider English Spoken: Y

Provider Language(s)

Spoken: Faroese, Farsi  
Cultural Competency: N

Hospital Affiliation:  
GROSSMONT HOSPITAL,  
ALVARADO HOSPITAL LLC,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, UCSD LA JOLLA  
JOHN SALLY THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 10\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: Imperial Health Holdings  
Medical Group-SD

### **OBSTETRICS / GYNECOLOGY**

#### **MEADOWS, AUDRA**

Provider ID: 285741

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1467585521

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

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## D. 专家名录

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**

**MELLENDEZ, 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**

**MELLENDEZ, 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**

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


**PROVIDER**  
 Website: N/A  
IPA: 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**



#### **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: 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: 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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

Provider 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: 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**

#### **SUYAMA, JULIE**

Provider ID: 284290  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE  
360  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

📞 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1306372800

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):

N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **THOMSON, SAMANTHA**

Provider ID: 285174  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
📞 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1689013468

☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: CEDARS  
SINAI MEDICAL CENTER,  
UCSD LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 16\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### **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

### **OBSTETRICS / GYNECOLOGY**

#### **TRUJILLO, JENNIFER**

Provider ID: 290128

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

950 S EUCLID AVE

SAN DIEGO, CA 92114

Phone: (619) 662-4100

Fax: (619) 662-4158

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1053407593

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA  
VISTA, SHARP CHULA VISTA  
MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP

### **OCCUPATIONAL MEDICINE**

#### **CROSS, JOHN**

Provider ID: 255322

Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST  
SAN DIEGO, CA 92103

Phone: (619) 471-9210

After Hours Phone: (619)  
471-9210

Provider Gender: Male

NPI: 1205989985

Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL MEDICINE**

#### **ISAKARI, MARCIA**

Provider ID: 255368

Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST  
SAN DIEGO, CA 92103

Phone: (619) 471-1600

After Hours Phone: (619)  
471-1600

Provider Gender: Female

NPI: 1861580771

Provider English Spoken: Y

Provider Language(s)  
Spoken: Portuguese

Cultural Competency: N

Hospital Affiliation: ADVENTIST  
HEALTH LODI MEMORIAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: UCSD Medical Group

### **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: 206549

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1669770939

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **BOND, KIMBERLEE**

Provider ID: 206548

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER  
LN STE 200

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1669770939

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OCCUPATIONAL THERAPIST**

#### **LARSEN, JULIE**

Provider ID: 258359

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8929 UNIVERSITY CENTER  
LN STE 200

SAN DIEGO, CA 92122

Phone: (855) 543-0333

Fax: (858) 657-1809

After Hours Phone: (855)  
543-0333

Provider Gender: Female

NPI: 1497009179

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

### **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

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## D. 专家名录

NPI: 1912325184

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### **OPHTHALMOLOGY**

#### **BEAZER, ALEX**

Provider ID: 272803

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1942662168

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY


THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### Network

#### **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: 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**

#### **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**

#### **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


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## D. 专家名录

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

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## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP


### **OPHTHALMOLOGY**

#### **KLINGE, 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

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## D. 专家名录

*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**






#### **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**

#### **PHAN, RYAN**

*Provider ID: 295647*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 4844 UNIVERSITY AVE STE  
A  
SAN DIEGO, CA 92105  
 *Phone: (619) 283-1303*  
*Fax: (619) 283-1666*  
 *After Hours Phone: (619) 283-1303*  
*Provider Gender: Male*  
*NPI: 1588027213*  
 *Provider English Spoken: Y*  
 *Provider Language(s)*  
*Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: SHARP MEMORIAL HOSPITAL, UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR, GROSSMONT HOSPITAL, SCRIPPS MEMORIAL HOSPITAL*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL): N

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

Min/Max Age: 0\None

American Sign Language (ASL):

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC, IHP of Southern Cal-PHP

### OPHTHALMOLOGY

#### **PHAN, RYAN**

Provider ID: 302925

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

4844 UNIVERSITY AVE STE A  
SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

### OPHTHALMOLOGY

#### **PHAN, RYAN**

Provider ID: 287883

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

10737 CAMINO RUIZ  
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858) 549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

### OPHTHALMOLOGY

#### **PHAN, RYAN**

Provider ID: 295646

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

10737 CAMINO RUIZ  
SAN DIEGO, CA 92126

Phone: (858) 549-3200

Fax: (858) 549-3207

After Hours Phone: (858) 549-3200

Provider Gender: Male

NPI: 1588027213

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, UCSD

LA JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR, GROSSMONT HOSPITAL,

SCRIPPS MEMORIAL

HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

**PHAN, RYAN**  
Provider ID: 305445  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 10737 CAMINO RUIZ STE  
100  
SAN DIEGO, CA 92126  
📞 Phone: (858) 549-3200  
Fax: (858) 549-3207  
🕒 After Hours Phone: (858)  
549-3200  
Provider Gender: Male  
NPI: 1588027213  
📄 Provider English Spoken: Y  
📄 Provider Language(s)  
Spoken: Vietnamese  
Cultural Competency: N  
Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, UCSD  
LA JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR, GROSSMONT HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
🗿 Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **OPHTHALMOLOGY**

**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**

**SHEILS, CATHERINE**  
Provider ID: 305305  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 5330 CARROLL CANYON

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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: 1932605649  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):

N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-TU 8:30AM-4PM  
W-F 8:30AM-1PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### OPHTHALMOLOGY

**SHEILS, CATHERINE**  
Provider ID: 299936  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
☎ Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Female

NPI: 1932605649  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, 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: IHP of Southern Cal-PHP,  
UCSD Medical Group

### OPHTHALMOLOGY

**SHEILS, CATHERINE**  
Provider ID: 305306  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 3939 3RD AVE  
SAN DIEGO, CA 92103  
☎ Phone: (800) 765-2737  
☎ Fax: (619) 291-6577  
🕒 After Hours Phone: (800) 765-2737  
Provider Gender: Female  
NPI: 1932605649  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL, SHARP  
MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-TU 8:30AM-4PM  
W-F 8:30AM-1PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group

### OPHTHALMOLOGY

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

IPA: 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: 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

#### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

IPA: IHP of Southern Cal-PHP

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### 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

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### 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

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### OPTOMETRIST

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#### 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

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### 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

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### OPTOMETRIST

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#### YU, CAROL

Provider ID: 301683

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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):  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录




 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **OTOLARYNGOLOGY**

#### **BLISS, MORGAN**



*Provider ID: 272565*  
*Board Certified Specialty: Yes*  
**RADY CHILDRENS HEALTH NETWORK**  
 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123  
 *Phone: (858) 309-7701*  
*Fax: (858) 966-8038*  
 *After Hours Phone: (858) 309-7701*  
*Provider Gender: Female*  
*NPI: 1760707657*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### **OTOLARYNGOLOGY**


#### **BRUMUND, KEVIN**

*Provider ID: 299635*  
*Board Certified Specialty: No*  
**UCSD MEDICAL GROUP**  
 8899 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1033193669*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*


*IPA: UCSD Medical Group*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Male*

*NPI: 1033193669*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: UCSD*

*MEDICAL CTR, UCSD LA*

*JOLLA JOHN SALLY*

*THORNTON*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **OTOLARYNGOLOGY**

#### **CALIFANO, JOSEPH**

*Provider ID: 299461*

*Board Certified Specialty: No*  
**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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Website: N/A  
IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **CALIFANO, JOSEPH**

Provider ID: 299462

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER LN  
SAN DIEGO, CA 92122  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1881652972

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **CALIFANO, JOSEPH**

Provider ID: 299457

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1881652972

Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

#### **CARVALHO, DANIELA**

Provider ID: 205628

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY STE 109  
SAN DIEGO, CA 92123  
Phone: (858) 309-7702  
After Hours Phone: (858) 309-7702

Provider Gender: Female

NPI: 1154492916

Provider English Spoken: Y  
Provider Language(s)  
Spoken: French, Spanish

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN DIEGO, SCRIPPS MEMORIAL HOSPITAL, SHARP MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


### HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): Board Certified Specialty: No  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


### 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: 299583

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1932297330


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS  
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### OTOLARYNGOLOGY

#### COFFEY, CHARLES

Provider ID: 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


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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---


### 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: 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: 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

#### **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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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: 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**

#### **FRIESEN, TZYYNONG**


Provider ID: 272604

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK


 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Phone: (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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

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**

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录

 *Provider English Spoken: Y*  
*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*  
*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*

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## D. 专家名录

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  
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: 272767

Board Certified Specialty: Yes

RADY CHILDRENS HEALTH  
NETWORK

📍 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

☎ Phone: (855) 309-7701

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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

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### **OTOLARYNGOLOGY**

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#### **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

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### **OTOLARYNGOLOGY**

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#### **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

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### **OTOLARYNGOLOGY**

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#### **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

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### **OTOLARYNGOLOGY**

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#### **MATSUOKA, AKIHIRO**

Provider ID: 299590

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127  
 Phone: (800) 926-8273  
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


#### NGUYEN, QUYEN


Provider ID: 299603

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (619) 543-6631  
Fax: (619) 543-6532

 After Hours Phone: (619)  
543-6631

Provider Gender: Female

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### OTOLARYNGOLOGY


#### NGUYEN, QUYEN


Provider ID: 299607

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

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## D. 专家名录

NPI: 1477524452

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS


GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

#### **NGUYEN, QUYEN**

Provider ID: 299606

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: 1477524452

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, SCRIPPS

GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### OTOLARYNGOLOGY

#### **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

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### **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: 299507

Board Certified Specialty: No

UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1346506920

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RONALD  
REAGAN UCLA MED CTR,  
SANTA MONICA UCLA MED  
CTR, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

### **WATSON, DEBORAH**

Provider ID: 299641

Board Certified Specialty: No  
UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **OTOLARYNGOLOGY**

### **WATSON, DEBORAH**

Provider ID: 299642

Board Certified Specialty: No  
UCSD MEDICAL GROUP

8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1346270816

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
GREEN HOSPITAL



























Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

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## D. 专家名录

<p>N  Accessibility: CONTACT PROVIDER  Website: N/A IPA: UCSD Medical Group</p>	<p> 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</p>	<p>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</p>
<hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>WATSON, DEBORAH</b> 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</p>	<hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>WEISSBROD, PHILIP</b> 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</p>	<hr/> <p><b>OTOLARYNGOLOGY</b></p> <p><b>WEISSBROD, PHILIP</b> 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</p>

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## D. 专家名录

 Website: N/A  
IPA: UCSD Medical Group



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### **OTOLARYNGOLOGY**

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#### **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

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### **OTOLARYNGOLOGY**

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#### **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

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### **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



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### **PATHOLOGY ANATOMIC**

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#### **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

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## D. 专家名录

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

 Website: N/A

IPA: UCSD Medical Group

### **PATHOLOGY ANATOMIC**

#### **CLINICAL**

#### **ALLEN, ELIZABETH**










Provider ID: 275756

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

 200 W ARBOR DR  
 SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273  
 Provider Gender: Female  
 NPI: 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

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## D. 专家名录


JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### 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



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## D. 专家名录

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: 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

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## D. 专家名录

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

### **PATHOLOGY CLINICAL**

#### **LE DZUNG, THE**

Provider ID: 247599

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1770526931

Provider English Spoken: Y

Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes




Min/Max Age: 0\None

American Sign Language (ASL):

N









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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### PATHOLOGY CLINICAL

#### **LE DZUNG, THE**

*Provider ID: 247600*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 10300 CAMPUS POINT DR  
SAN DIEGO, CA 92121  
 *Phone: (800) 926-8273*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1770526931*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Vietnamese*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### PEDIATRIC ALLERGY /

### IMMUNOLOGY

#### **ALKATIB, RHONDA**

*Provider ID: 291226*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 2655 CAMINO DEL RIO N  
STE 425  
SAN DIEGO, CA 92108  
 *Phone: (619) 286-6687*  
*Fax: (619) 286-6695*  
 *After Hours Phone: (619) 286-6687*  
*Provider Gender: Female*  
*NPI: 1417363086*  
 *Provider English Spoken: Y*  
 *Provider Language(s) Spoken: Arabic, Spanish*  
*Cultural Competency: N*  
*Hospital Affiliation: ALVARADO HOSPITAL LLC*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*

### PEDIATRIC ALLERGY / IMMUNOLOGY

#### **COLLINS, CATHLEEN**


*Provider ID: 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

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## D. 专家名录

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: 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

#### **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):  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录


**DIEGO**

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

 Website: N/A


IPA: Rady Childrens Health  
Network


### 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 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 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

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## D. 专家名录

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

Phone: (858) 966-5855  
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**

#### **DO, THOMAS**

Provider ID: 206162

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3020 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

Phone: (858) 366-5855  
Fax: (858) 966-7423

After Hours Phone: (858)  
366-5855

Provider Gender: Male

NPI: 1053545376

Provider English Spoken: Y  
Cultural Competency: N

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, CHILDRENS HOSPITAL  
AT MISSION, CHILDRENS  
HOSPITAL OF ORANGE  
COUNTY

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **PEDIATRIC CARDIOLOGY**

#### **DUMMER, KIRSTEN**

Provider ID: 260595

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5855

Fax: (858) 966-7903

 After Hours Phone: (858)  
966-5855

Provider Gender: Female

NPI: 1780642280

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

### **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

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

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## D. 专家名录

*DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19*

*American Sign Language (ASL):  
N*




 *Accessibility: CONTACT  
PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health  
Network*

---


### **PEDIATRIC CARDIOLOGY**

#### **MUELLER, DANA**



*Provider ID: 245535  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 *3020 CHILDRENS WAY  
SAN DIEGO, CA 92123*  
 *Phone: (858) 966-5855*  
 *After Hours Phone: (858)  
966-5855*

*Provider Gender: Female  
NPI: 1184915712*

 *Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N*



 *Accessibility: CONTACT  
PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health  
Network*

---

### **PEDIATRIC CARDIOLOGY**


#### **NARAYAN, HARI**

*Provider ID: 205349  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 *3020 CHILDRENS WAY  
SAN DIEGO, CA 92123*  
 *Phone: (858) 966-5855*  
*Fax: (858) 966-7903*



 *After Hours Phone: (858)  
966-5855*

*Provider Gender: Male  
NPI: 1376705707*

 *Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health  
Network*


---

### **PEDIATRIC CARDIOLOGY**

#### **RAO, ROHIT**


*Provider ID: 206122  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 *3020 CHILDRENS WAY  
SAN DIEGO, CA 92123*

 *Phone: (858) 966-5855*  
*Fax: (858) 966-7903*



 *After Hours Phone: (858)  
966-5855*

*Provider Gender: Male  
NPI: 1063452779*

 *Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO*

*Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*  
 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

---

### **PEDIATRIC CARDIOLOGY**

#### **SILVASEPULVEDA, JOSE**

*Provider ID: 206297  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK*

 *3020 CHILDRENS WAY*

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## D. 专家名录

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**

**VELLOREGOVARDHAN, SHILPA**  
Provider ID: 271454  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-5855  
Fax: (858) 966-7903  
📞 After Hours Phone: (858) 966-5855  
Provider Gender: Female  
NPI: 1477702165  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<hr/> <b>PEDIATRIC CARDIOLOGY</b> <hr/> <b>WERHO, DAVID</b> Provider ID: 206316 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-5855 Fax: (858) 966-7903 After Hours Phone: (858) 966-5855 Provider Gender: Male NPI: 1235391863 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network	<b>NETWORK</b> 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	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
<hr/> <b>PEDIATRIC CARDIOLOGY</b> <hr/> <b>WILLIAMS, MATTHEW</b> Provider ID: 206287 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK	<hr/> <b>PEDIATRIC CARDIOLOGY</b> <hr/> <b>YUNOSZAI, ADEL</b> 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	<hr/> <b>PEDIATRIC DERMATOLOGY</b> <hr/> <b>EICHENFIELD, DAWN</b> 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

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## D. 专家名录

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### PEDIATRIC 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 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

**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

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## D. 专家名录

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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

<u>PEDIATRIC EMERGENCY MEDICINE</u>	<u>MEDICINE</u>	<u>PEDIATRIC EMERGENCY MEDICINE</u>
<p><b>BRYL, AMY</b>  <i>Provider ID: 205967</i>  <i>Board Certified Specialty: No</i>  <b>RADY CHILDRENS HEALTH NETWORK</b>   3020 CHILDRENS WAY            SAN DIEGO, CA 92123   <i>Phone: (858) 966-8800</i>   <i>After Hours Phone: (858) 966-8800</i>  <i>Provider Gender: Female</i>  <i>NPI: 1497079487</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation:</i>            SOUTHWEST HEALTHCARE            INLAND VALLEY HOSPITAL,            UCSF BENIOFF CHILDREN'S            HOSPITAL OAKLAND,            SOUTHWEST HEALTHCARE            RANCHO SPRINGS HOSPITAL,            RADY CHILDRENS HOSPITAL            SAN DIEGO  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Website: N/A</i>  <i>IPA: Rady Childrens Health Network</i></p>	<p><b>CAMPBELL, SARA</b>  <i>Provider ID: 206335</i>  <i>Board Certified Specialty: No</i>  <b>RADY CHILDRENS HEALTH NETWORK</b>   3020 CHILDRENS WAY            SAN DIEGO, CA 92123   <i>Phone: (858) 966-8800</i>   <i>After Hours Phone: (858) 966-8800</i>  <i>Provider Gender: Female</i>  <i>NPI: 1841687563</i>   <i>Provider English Spoken: Y</i>   <i>Provider Language(s) Spoken: Farsi, Spanish</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation:</i>            CHILDRENS HOSP OF LOS ANGELES, RADY CHILDRENS HOSPITAL SAN DIEGO  <i>Medi-Cal Open Panel: Yes</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM</i>   <i>Website: N/A</i>  <i>IPA: Rady Childrens Health Network</i></p>	<p><b>RADY CHILDRENS HEALTH NETWORK</b>   3020 CHILDRENS WAY            SAN DIEGO, CA 92123   <i>Phone: (858) 966-8800</i>   <i>After Hours Phone: (858) 966-8800</i>  <i>Provider Gender: Female</i>  <i>NPI: 1700047628</i>   <i>Provider English Spoken: Y</i>  <i>Cultural Competency: N</i>  <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i>  <i>Medi-Cal Open Panel: No</i>  <i>Min/Max Age: 0\19</i>  <i>American Sign Language (ASL):</i>            N   <i>Accessibility: CONTACT PROVIDER</i>   <i>Hours: M-F 8AM-5PM</i>   <i>Website: N/A</i>  <i>IPA: Rady Childrens Health Network</i></p>
<p><b>CHOO, SUN</b>  <i>Provider ID: 296535</i>  <i>Board Certified Specialty: No</i>  <b>RADY CHILDRENS HEALTH NETWORK</b>   4305 UNIVERSITY AVE STE 150            SAN DIEGO, CA 92105   <i>Phone: (619) 280-2905</i>  <i>Fax: (619) 283-1614</i></p>	<p><b>CHOO, SUN</b>  <i>Provider ID: 296535</i>  <i>Board Certified Specialty: No</i></p>	

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## D. 专家名录

☎ *After Hours Phone: (619) 280-2905*

*Provider Gender: Female*

*NPI: 1700047628*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: SU 1PM-10PM*  
*M-F 4PM-10PM*  
*SA 1PM-10PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST*

*HEALTHCARE INLAND VALLEY HOSPITAL, SHARP CHULA VISTA MED CTR, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: SCRIPPS MEMORIAL HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND, SCRIPPS MEMORIAL HOSPITAL ENCINITAS*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **CONRAD, HEATHER**

*Provider ID: 205960*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

📍 *3020 CHILDRENS WAY*  
*SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-8800*

☎ *After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1205813409*

☑ *Provider English Spoken: Y*

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **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*

### PEDIATRIC EMERGENCY

#### MEDICINE

#### **DEVERA, GEMMIE**

*Provider ID: 288572*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*

📍 *3020 CHILDRENS WAY*  
*SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-8800*

☎ *After Hours Phone: (858) 966-8800*

*Provider Gender: Female*

*NPI: 1366622078*

☑ *Provider English Spoken: Y*

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## D. 专家名录

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: No  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **DO, STEPHANIE**

Provider ID: 287393

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1750513644

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Martin

Luther King Jr Community

Hospital, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **DONOFRIO-ODMANN, JOY**

Provider ID: 205375

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1740571165

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: VALLEY  
CHILDRENS HOSPITAL,

SOUTHWEST HEALTHCARE  
INLAND VALLEY HOSPITAL,

SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,

RADY CHILDRENS HOSPITAL  
SAN DIEGO, UCSF BENIOFF

CHILDREN'S HOSPITAL  
OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。





## D. 专家名录


### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC EMERGENCY MEDICINE

#### FISHER, JAY

Provider ID: 295690  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858) 966-8800  
Provider Gender: Male  
NPI: 1629118518  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network


### 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


#### GROSS, MATTHEW

Provider ID: 297172

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 4305 UNIVERSITY AVE STE 150

SAN DIEGO, CA 92105

 Phone: (619) 280-2905

Fax: (619) 283-1614

 After Hours Phone: (619) 280-2905

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Provider Gender: Male  
NPI: 1942223664  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

**GROSS, MATTHEW**  
Provider ID: 297174  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8800  
🕒 After Hours Phone: (858)  
966-8800  
Provider Gender: Male  
NPI: 1942223664  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

**HERSKOVITZ, SCOTT**  
Provider ID: 261045  
Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK  
📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8800  
🕒 After Hours Phone: (858)  
966-8800  
Provider Gender: Male  
NPI: 1225393499  
☑ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT

PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health  
Network

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>INDRA, SEAN</b> 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</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>JACKSON, TAYLOR</b> Provider ID: 302127 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-5999 Fax: (858) 966-8519</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>KHAN, SHAHFAR</b> Provider ID: 294094 Board Certified Specialty: No RADY CHILDRENS HEALTH NETWORK 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</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p><b>RADY CHILDRENS HEALTH NETWORK</b> 3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-8800 After Hours Phone: (858) 966-8800 Provider Gender: 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</p>	<p><b><u>PEDIATRIC EMERGENCY MEDICINE</u></b></p> <p>After Hours Phone: (858) 966-5999 Provider Gender: Male NPI: 1326543752 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\19 American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: Rady Childrens Health Network</p>
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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

*Cultural Competency: N*  
*Hospital 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**





#### **MCDANIEL, MICHELE**

*Provider ID: 248071*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 *Phone: (858) 966-8800*  
 *After Hours Phone: (858) 966-8800*  
*Provider Gender: Female*  
*NPI: 1366761959*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: SCRIPPS MERCY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network, UCSD Medical Group*



### **PEDIATRIC EMERGENCY MEDICINE**

#### **MENDES, CHANTAL**

*Provider ID: 295668*  
*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH NETWORK*  
 4305 UNIVERSITY AVE STE 150  
SAN DIEGO, CA 92105  
 *Phone: (619) 280-2905*  
*Fax: (619) 283-1614*  
 *After Hours Phone: (619) 280-2905*  
*Provider Gender: Female*  
*NPI: 1134681265*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\19*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT*




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录



**PROVIDER**  
 Hours: SU 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


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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## D. 专家名录

### NETWORK


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Male

NPI: 1215103023

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE

#### NGUYEN, 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


#### 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


#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **PADE, KATHRYN**

Provider ID: 262411

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1215375183

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Stanford  
Health Care, LUCILE SALTER  
PACKARD CHILDRENS HOSP,  
RADY CHILDRENS HOSPITAL  
SAN DIEGO


Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT

#### PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### PEDIATRIC EMERGENCY MEDICINE


#### **PARK, BRIAN**

Provider ID: 302352

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3020 CHILDRENS WAY  
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


#### **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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

**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**


**QUINONES-PEREZ, BIANCA**  
Provider ID: 206947  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK


 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8800

 After Hours Phone: (858) 966-8800


Provider Gender: Female  
NPI: 1124360565


 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Website: N/A  
IPA: Rady Childrens Health Network

**PEDIATRIC EMERGENCY MEDICINE**

**QUINONES-PEREZ, BIANCA**  
Provider ID: 206949  
Board Certified Specialty: No

**PEDIATRIC EMERGENCY MEDICINE**

**RADY CHILDRENS HEALTH NETWORK**

 4305 UNIVERSITY AVE STE 150  
SAN DIEGO, CA 92105

 Phone: (619) 280-2905  
Fax: (619) 283-1614

 After Hours Phone: (619) 280-2905

Provider Gender: Female  
NPI: 1124360565

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

 Website: N/A  
IPA: Rady Childrens Health Network




**PEDIATRIC EMERGENCY MEDICINE**

**RANASURIYA, DUNISHA**  
Provider ID: 216970  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH

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## D. 专家名录

### NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: 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

#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录




### PROVIDER

 Hours: 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  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 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

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## D. 专家名录

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: 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

#### **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


#### **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

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## D. 专家名录

<b><u>PEDIATRIC EMERGENCY</u></b> <b><u>MEDICINE</u></b>	<b><u>PEDIATRIC EMERGENCY</u></b> <b><u>MEDICINE</u></b>	<b><u>PEDIATRIC EMERGENCY</u></b> <b><u>MEDICINE</u></b>
<b>TANG, ANDREW</b> <i>Provider ID: 294677</i> <i>Board Certified Specialty: No</i> <b>RADY CHILDRENS HEALTH NETWORK</b> 3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-8800 After Hours Phone: (858) 966-8800 <i>Provider Gender: Male</i> <i>NPI: 1184071516</i> Provider English Spoken: Y <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A <i>IPA: Rady Childrens Health Network</i>	<b>RADY CHILDRENS HEALTH NETWORK</b> 4305 UNIVERSITY AVE STE 150 SAN DIEGO, CA 92105 Phone: (619) 280-2905 Fax: (619) 283-1614 After Hours Phone: (619) 280-2905 <i>Provider Gender: Female</i> <i>NPI: 1407299787</i> Provider English Spoken: Y <i>Cultural Competency: N</i> <i>Hospital Affiliation: RONALD REAGAN UCLA MED CTR, SANTA MONICA UCLA MED CTR, RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> Accessibility: CONTACT PROVIDER Hours: SU 1PM-10PM M-F 4PM-10PM SA 1PM-10PM Website: N/A <i>IPA: Rady Childrens Health Network</i>	<b>RADY CHILDRENS HEALTH NETWORK</b> 3020 CHILDRENS WAY SAN DIEGO, CA 92123 Phone: (858) 966-8800 After Hours Phone: (858) 966-8800 <i>Provider Gender: Female</i> <i>NPI: 1417496985</i> Provider English Spoken: Y Provider Language(s) Spoken: Spanish, Vietnamese <i>Cultural Competency: N</i> <i>Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL</i> <i>Medi-Cal Open Panel: Yes</i> <i>Min/Max Age: 0\19</i> <i>American Sign Language (ASL): N</i> Accessibility: CONTACT PROVIDER Website: N/A <i>IPA: Rady Childrens Health Network</i>
<b>TODD, SARAH</b> <i>Provider ID: 302800</i> <i>Board Certified Specialty: No</i>	<b>TRAN, THERESA</b> <i>Provider ID: 301834</i> <i>Board Certified Specialty: No</i>	<b>TRAUT, JOEL</b> <i>Provider ID: 205475</i> <i>Board Certified Specialty: No</i> <b>RADY CHILDRENS HEALTH NETWORK</b> 3020 CHILDRENS WAY

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## D. 专家名录

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

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### PEDIATRIC EMERGENCY MEDICINE


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#### **VANE, JACKSON**

*Provider ID: 205883*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-8800*

 *After Hours Phone: (858) 966-8800*

*Provider Gender: Male*

*NPI: 1952608580*


 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### PEDIATRIC EMERGENCY

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### MEDICINE


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#### **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*

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### PEDIATRIC EMERGENCY MEDICINE

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#### **VARGAS, JACLYN**

*Provider ID: 285935*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

 3010 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

 *Phone: (858) 576-1700*

*Fax: (858) 966-8479*

 *After Hours Phone: (858) 576-1700*

*Provider Gender: Female*

*NPI: 1619359718*

 *Provider English Spoken: Y  
Cultural Competency: N*


*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, Los Angeles General Medical Center*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health Network*

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### PEDIATRIC EMERGENCY MEDICINE


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#### **VARGAS, JACLYN**

*Provider ID: 285934*

*Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 *Phone: (858) 966-5841*

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## D. 专家名录

Fax: (858) 966-6728

☎ After Hours Phone: (858) 966-5841

Provider Gender: Female

NPI: 1619359718

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Los Angeles General  
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **VARGAS, JACLYN**

Provider ID: 296486

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105

☎ Phone: (619) 280-2905

Fax: (619) 283-1614

☎ After Hours Phone: (619)  
280-2905

Provider Gender: Female

NPI: 1619359718

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, Los Angeles General  
Medical Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: SU 1PM-10PM  
M-F 4PM-10PM  
SA 1PM-10PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **VAYNGORTIN, TATYANA**

Provider ID: 263012

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-8800

☎ After Hours Phone: (858)  
966-8800

Provider Gender: Female

NPI: 1578967907

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S  
HOSPITAL OAKLAND,  
CHILDRENS HOSP OF LOS  
ANGELES, RADY CHILDRENS  
HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

### PEDIATRIC EMERGENCY MEDICINE

#### **WANG, YVETTE**

Provider ID: 263416

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: 1710321278

☐ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes


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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

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### **PEDIATRIC EMERGENCY MEDICINE**

#### **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**


#### **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**


#### **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


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### **PEDIATRIC ENDOCRINOLOGY**

#### **PATTERSON, MARY**

Provider ID: 206059

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL  
4 NORTH

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-4032  
Fax: (858) 966-6227  
🕒 After Hours Phone: (858) 966-4032  
Provider Gender: Female  
NPI: 1912112020  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### PEDIATRIC ENDOCRINOLOGY

#### **SINGH, PUJA**

Provider ID: 302818  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 3030 CHILDRENS WAY FL 4  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-4032  
Fax: (858) 966-6227  
🕒 After Hours Phone: (858) 966-4032  
Provider Gender: Female

NPI: 1841721172  
🗣 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 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

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## D. 专家名录

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC GASTROENTEROLOGY

#### **GOYAL, NIDHI**

Provider ID: 205598

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2 SOUTH  
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Female

NPI: 1598029332

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSF BENIOFF CHILDREN'S HOSPITAL OAKLAND

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC GASTROENTEROLOGY

#### **HARTMANN, PHILLIPP**

Provider ID: 294228

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1356796536

Provider English Spoken: Y

Provider Language(s) Spoken: French, German

Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### PEDIATRIC GASTROENTEROLOGY

#### **LIN, TOM**

Provider ID: 297707

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

Phone: (858) 966-4003

Fax: (858) 560-6798

After Hours Phone: (858) 966-4003

Provider Gender: Male

NPI: 1114136934

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

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## D. 专家名录

---

**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):  
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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Fax: (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

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **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

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **DING, HILDA**

Provider ID: 206173

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

📍 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5811  
Fax: (858) 966-8035

☎ After Hours Phone: (858)  
966-5811

Provider Gender: Female  
NPI: 1780813923

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: Rady Childrens Health  
Network

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### PEDIATRIC HEMATOLOGY / ONCOLOGY

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#### **ELSTER, JENNIFER**

Provider ID: 205769

Board Certified Specialty: Yes  
RADY CHILDRENS HEALTH  
NETWORK

📍 3010 CHILDRENS WAY  
SAN DIEGO, CA 92123

☎ Phone: (858) 966-5811  
Fax: (858) 966-8035

☎ After Hours Phone: (858)  
966-5811

Provider Gender: Female  
NPI: 1588866115

☑ Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19



American Sign Language (ASL):  
N

♿ Accessibility: CONTACT

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## D. 专家名录

### 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

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## D. 专家名录





 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

#### **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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
🕒 Hours: M-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

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## D. 专家名录

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**

#### **INGULLI, ELIZABETH**

Provider ID: 302778  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 8110 BIRMINGHAM WAY

STE 28  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8052  
Fax: (858) 966-7789  
🕒 After Hours Phone: (858) 966-8052  
Provider Gender: Female  
NPI: 1811919244  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR, SHARP MEMORIAL HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### **PEDIATRIC NEPHROLOGY**

#### **MAK, ROBERT**

Provider ID: 302776  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 8110 BIRMINGHAM WAY FL 1  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8052  
Fax: (858) 966-7789  
🕒 After Hours Phone: (858)

966-8052  
Provider Gender: Male  
NPI: 1740295252  
🗉 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: Rady Childrens Health Network





### **PEDIATRIC NEPHROLOGY**

#### **PERENS, ELLIOT**




Provider ID: 302765  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK  
📍 8110 BIRMINGHAM WAY FL 1  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8052  
Fax: (858) 966-7789  
🕒 After Hours Phone: (858) 966-8052  
Provider Gender: Male  
NPI: 1922328947

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## D. 专家名录





 *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 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*

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## D. 专家名录

Network

---

### **PEDIATRIC PULMONOLOGY**

**CERNELC-KOHAN, MATEJKA**

Provider ID: 243041

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

3030 CHILDRENS WAY FL  
2

SAN DIEGO, CA 92123

Phone: (858) 966-5846

Fax: (858) 966-8457

After Hours Phone: (858)  
966-5846

Provider Gender: Female

NPI: 1871752451

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSF

BENIOFF CHILDREN'S

HOSPITAL OAKLAND, RADY

CHILDRENS HOSPITAL SAN

DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health  
Network

---

### **PEDIATRIC PULMONOLOGY**

**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**

**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)




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## D. 专家名录




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

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**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

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**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

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## D. 专家名录



8:30AM-4:30PM

 Website: N/A  
IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**



#### **RAO, APARNA**

Provider ID: 206123  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-5846  
Fax: (858) 569-9052

 After Hours Phone: (858) 966-5846


Provider Gender: Female  
NPI: 1649222340

 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hindi

Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM


 Website: N/A


IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **RAO, APARNA**



Provider ID: 206124  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 2  
SAN DIEGO, CA 92123

 Phone: (858) 966-5846  
Fax: (858) 966-5847

 After Hours Phone: (858) 966-5846

Provider Gender: Female  
NPI: 1649222340


 Provider English Spoken: Y  
 Provider Language(s) Spoken: Hindi

Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


### **PEDIATRIC PULMONOLOGY**

#### **RYU, JULIE**

Provider ID: 206218  
Board Certified Specialty: No

RADY CHILDRENS HEALTH NETWORK

 3030 CHILDRENS WAY FL 2 NORTH  
SAN DIEGO, CA 92123

 Phone: (858) 966-5846  
Fax: (858) 569-5847

 After Hours Phone: (858) 966-5846


Provider Gender: Female  
NPI: 1568533321

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, UCSD MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network

### **PEDIATRIC PULMONOLOGY**

#### **TANTISIRA, KELAN**

Provider ID: 277183  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-5846  
Fax: (858) 569-9052

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## D. 专家名录

 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

#### **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

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## D. 专家名录


<b>PEDIATRICS</b>	<i>Provider Gender: Female</i>	Website: N/A
<b>ALLSUP, VICTORIA</b>	NPI: 1437786944	IPA: IHP of Southern Cal-PHP
<i>Provider ID: 302345</i>	Provider English Spoken: Y	
<i>Board Certified Specialty: No</i>	<i>Cultural Competency: N</i>	
<i>IHP OF SOUTHERN CAL-PHP</i>	<i>Medi-Cal Open Panel: Yes</i>	
7011 LINDA VISTA RD	<i>Min/Max Age: 0\18</i>	
SAN DIEGO, CA 92111	<i>American Sign Language (ASL):</i>	
Phone: (858) 810-8700	N	
<i>Fax: (858) 633-4680</i>	Accessibility: CONTACT	
After Hours Phone: (858)	<i>PROVIDER</i>	
810-8700	Hours: M-F 8AM-5PM	
<i>Provider Gender: Female</i>	Website: N/A	
<i>NPI: 1437786944</i>	IPA: IHP of Southern Cal-PHP	
Provider English Spoken: Y	<b>PEDIATRICS</b>	
<i>Cultural Competency: N</i>	<b>ANDREE, GREGOR</b>	
<i>Medi-Cal Open Panel: Yes</i>	<i>Provider ID: 293220</i>	
<i>Min/Max Age: 0\18</i>	<i>Board Certified Specialty: No</i>	
<i>American Sign Language (ASL):</i>	<i>IHP OF SOUTHERN CAL-PHP</i>	
N	7011 LINDA VISTA RD	
Accessibility: CONTACT	SAN DIEGO, CA 92111	
<i>PROVIDER</i>	Phone: (858) 810-8700	
Hours: M-F 8AM-5PM	<i>Fax: (858) 633-4680</i>	
Website: N/A	After Hours Phone: (858)	
IPA: IHP of Southern Cal-PHP	810-8700	
<b>PEDIATRICS</b>	<i>Provider Gender: Male</i>	
<b>ALLSUP, VICTORIA</b>	NPI: 1467436063	
<i>Provider ID: 302344</i>	Provider English Spoken: Y	
<i>Board Certified Specialty: No</i>	Provider Language(s)	
<i>IHP OF SOUTHERN CAL-PHP</i>	<i>Spoken: German, Spanish</i>	
6973 LINDA VISTA RD	<i>Cultural Competency: N</i>	
SAN DIEGO, CA 92111	<i>Medi-Cal Open Panel: Yes</i>	
Phone: (858) 279-0925	<i>Min/Max Age: 0\18</i>	
<i>Fax: (858) 633-4680</i>	<i>American Sign Language (ASL):</i>	
After Hours Phone: (858)	N	
279-0925	Accessibility: CONTACT	
	<i>PROVIDER</i>	
	Website: N/A	
	IPA: IHP of Southern Cal-PHP	
	<b>PEDIATRICS</b>	
	<b>BEAUCHAMP-WALTERS,</b>	
	<b>JULIA</b>	
	<i>Provider ID: 270063</i>	
	<i>Board Certified Specialty: No</i>	
	<i>RADY CHILDRENS HEALTH</i>	
	<i>NETWORK</i>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 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: 205753

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY STE  
300

SAN DIEGO, CA 92123  
 Phone: (858) 966-8974  
Fax: (858) 966-6721

 After Hours Phone: (858)  
966-8974

Provider Gender: Female

NPI: 1922179688


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---



### PEDIATRICS

#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Rady Childrens Health Network

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### **PEDIATRICS**

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#### **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

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### **PEDIATRICS**


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#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: 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: 296241  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 4305 UNIVERSITY AVE STE  
150  
SAN DIEGO, CA 92105  
📞 Phone: (619) 280-2058  
Fax: (858) 633-4682  
🕒 After Hours Phone: (619)  
280-2058  
Provider Gender: Female  
NPI: 1275895849  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
SA 8AM-2PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **PEDIATRICS**

**GIBONEY, JENNIFER**  
Provider ID: 296242

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
📞 Phone: (858) 810-8700  
Fax: (858) 633-4680  
🕒 After Hours Phone: (858)  
810-8700  
Provider Gender: Female  
NPI: 1275895849  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M 8:30AM-5:30PM  
TU 5:30PM-8:30PM  
W 8:30AM-5:30PM  
TH 5:30PM-8:30PM  
F 8:30AM-5:30PM  
SA 9AM-4PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **PEDIATRICS**

**GRAY, SARAH**  
Provider ID: 284224  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

American Sign Language (ASL):  Website: N/A  
IPA: Community Care IPA LLC

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

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### 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

---


### 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

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### 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

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### PEDIATRICS

#### LOPEZ, XIMENA

Provider ID: 302856



Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK


 3030 CHILDRENS WAY FL  
4

SAN DIEGO, CA 92123


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## D. 专家名录

 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**


#### **MARC-AURELE, KRISHELLE**

Provider ID: 301719

Board Certified Specialty: No  
 UCSD MEDICAL GROUP

 7910 FROST ST STE 230  
 SAN DIEGO, CA 92123

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
 926-8273

Provider Gender: Female

NPI: 1952503435

 Provider English Spoken: Y  
 Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN

DIEGO, UCSD MEDICAL CTR,

UCSD LA JOLLA JOHN SALLY

THORNTON, TRI CITY

MEDICAL CTR, SCRIPPS

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 **Accessibility: CONTACT PROVIDER**

 **Website: N/A**

*IPA: Rady Childrens Health Network, UCSD Medical Group*

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### **PEDIATRICS**


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#### **NGO, MAI**


*Provider ID: 302113*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK*

 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*

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### **PEDIATRICS**


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#### **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*

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### **PEDIATRICS**


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#### **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*

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### **PEDIATRICS**

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#### **PIERCE, HEATHER**

*Provider ID: 205701*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

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

#### 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


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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: Rady Childrens Health Network*







### **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**








#### **SONG, RICHARD**

*Provider ID: 301716*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 7910 FROST ST STE 230  
SAN DIEGO, CA 92123  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1881893477*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, PALOMAR HEALTH, SOUTHWEST HEALTHCARE RANCHO SPRINGS HOSPITAL, SCRIPPS MEMORIAL HOSPITAL, SCRIPPS MEMORIAL HOSPITAL ENCINITAS, PALOMAR MEDICAL CENTER, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL, SOUTHWEST HEALTHCARE INLAND VALLEY HOSPITAL*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\18*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*

*IPA: Rady Childrens Health Network, UCSD Medical Group*

### **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*

### **PEDIATRICS**

#### **SUTTNER, DENISE**

*Provider ID: 301721*  
*Board Certified Specialty: No*








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## D. 专家名录

### UCSD MEDICAL GROUP

 7910 FROST ST STE 230  
SAN DIEGO, CA 92123  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1457433799  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SCRIPPS MERCY HOSPITAL  
CHULA VISTA, SCRIPPS  
MEMORIAL HOSPITAL  
ENCINITAS, SOUTHWEST  
HEALTHCARE INLAND  
VALLEY HOSPITAL,  
SOUTHWEST HEALTHCARE  
RANCHO SPRINGS HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, SCRIPPS  
MEMORIAL HOSPITAL,  
SCRIPPS MERCY HOSPITAL  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\18  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group








### PEDIATRICS

**WEISS, KATHERINE**  
Provider ID: 301703  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 7910 FROST ST STE 230  
SAN DIEGO, CA 92123  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1053541862  
 Provider English Spoken: Y  
 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  
 Website: N/A  
IPA: Rady Childrens Health  
Network, UCSD Medical Group

### 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

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## D. 专家名录

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 /

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## D. 专家名录

### **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

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## D. 专家名录

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT


**ARMEEN, GARY**


Provider ID: 247035

Board Certified Specialty: No

UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1760774863

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

**BERGEN, SOPHEA**


Provider ID: 295518

Board Certified Specialty: No


IHP OF SOUTHERN CAL-PHP

 6719 ALVARADO RD STE  
308

SAN DIEGO, CA 92120

 Phone: (619) 265-7912

Fax: (619) 265-7922

 After Hours Phone: (619)  
265-7912

Provider Gender: Female

NPI: 1558300665

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ALVARADO

HOSPITAL LLC, PALOMAR

MEDICAL CENTER, SCRIPPS

MEMORIAL HOSPITAL,

GROSSMONT HOSPITAL,

SHARP MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes


Min/Max Age: 16\None

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

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## D. 专家名录

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


### **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**


#### **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: 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)

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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: 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**

**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: 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**

**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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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## D. 专家名录

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): IHP OF SOUTHERN CAL-PHP  
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): IHP of Southern Cal-PHP  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 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)

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## D. 专家名录

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  
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):

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## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

### **PHYSICIANS ASSISTANT**


#### **NAKAMITSU, ABIGAIL**

*Provider ID: 268666*

*Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK*

 3030 CHILDRENS WAY FL  
3

SAN DIEGO, CA 92123

 *Phone: (858) 966-6789*

*Fax: (858) 966-8519*

 *After Hours Phone: (858)  
966-6789*

*Provider Gender: Female*

*NPI: 1932459179*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Hospital Affiliation: RADY*

*CHILDRENS HOSPITAL SAN  
DIEGO*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: Rady Childrens Health  
Network*

### **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**


#### **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**

#### **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*

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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F  
8:30AM-4:30PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **PELIO, DARREN**

Provider ID: 293441  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
📞 Phone: (800) 926-8275  
Fax: (888) 539-8783

🕒 After Hours Phone: (800)  
926-8275

Provider Gender: Male  
NPI: 1386791028

🗨️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **PELIO, DARREN**

Provider ID: 293444  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 3900 5TH AVE STE 110  
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8278  
Fax: (888) 539-8786

🕒 After Hours Phone: (800)  
926-8278

Provider Gender: Male  
NPI: 1386791028

🗨️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **PERREAULT, MARK**

Provider ID: 283586  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1356749451

🗨️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **PERREAULT, MARK**

Provider ID: 283585  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

📞 Phone: (800) 926-8273  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1356749451

🗨️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **PHUNG, AIVI**

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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

☎ After Hours Phone: (858) 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

☑ 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

#### **PRIEST, VIVIAN**

Provider ID: 272430

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1225581754

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Vietnamese

Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### **PYLE, ALEXANDRA**

Provider ID: 297718

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 9333 GENESEE AVE STE  
350

SAN DIEGO, CA 92121

☎ Phone: (858) 455-6460

Fax: (858) 455-7197

☎ After Hours Phone: (858)  
455-6460

Provider Gender: Female

NPI: 1225416472

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 20\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8:30AM-4PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### PHYSICIANS ASSISTANT

#### **QUIJANO, GLENN**

Provider ID: 307067

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 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

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## D. 专家名录


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

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## D. 专家名录

☎ 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): UCSD MEDICAL GROUP

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): UCSD MEDICAL GROUP

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **SCHULZ, STEFAN**

Provider ID: 243419

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 200 W ARBOR DR

SAN DIEGO, CA 92103

📞 Phone: (800) 926-8273

Fax: (888) 539-8781

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1316102163

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **SHAUL, SHERA**

Provider ID: 247974

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE 111  
SAN DIEGO, CA 92121

📞 Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1336659507

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **PHYSICIANS ASSISTANT**

#### **SPEH, BRIAN**

Provider ID: 305009

Board Certified Specialty: No

UCSD MEDICAL GROUP

📍 6655 ALVARADO RD  
SAN DIEGO, CA 92120

📞 Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1124593926

☑ Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🌐 Website: N/A

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## D. 专家名录

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

---

#### TESFAI, HELEN

Provider ID: 287372

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1942724042

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

---

#### WAHLIN, TAMARA

Provider ID: 299599

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 8899 UNIVERSITY CENTER  
LN

SAN DIEGO, CA 92122

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

---

#### WAHLIN, TAMARA

Provider ID: 299600

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1083823322

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### PHYSICIANS ASSISTANT

---

#### WAHLIN, TAMARA

Provider ID: 299598




Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127


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## D. 专家名录


 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: 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: 278201  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103

 Phone: (800) 925-8271  
 Fax: (888) 539-8781

 After Hours Phone: (800)  
925-8271

Provider Gender: Female  
NPI: 1932494499

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish


Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### PHYSICIANS ASSISTANT

#### WEIR, JACQUELINE

Provider ID: 278200  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4168 FRONT ST

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## D. 专家名录

SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: 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: 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: 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: 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

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## D. 专家名录

<b>PREVENTATIVE MEDICINE</b>	<b>Board Certified Specialty: No</b>	<b>926-8273</b>
<b>GENERAL</b>	<b>UCSD MEDICAL GROUP</b>	<b>Provider Gender: Female</b>
<b>ROMERO, CAMILA</b>	350 DICKINSON ST SAN DIEGO, CA 92103	<b>NPI: 1932522778</b>
<i>Provider ID: 293289</i>	Phone: (800) 926-8273	Provider English Spoken: Y
<i>Board Certified Specialty: No</i>	Fax: (888) 539-8781	Cultural Competency: N
<i>IHP OF SOUTHERN CAL-PHP</i>	After Hours Phone: (800) 926-8273	Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON
6973 LINDA VISTA RD SAN DIEGO, CA 92111	Provider Gender: Female	Medi-Cal Open Panel: Yes
Phone: (858) 279-0925	NPI: 1932522778	Min/Max Age: 0\None
Fax: (858) 633-4680	Provider English Spoken: Y	American Sign Language (ASL): N
After Hours Phone: (858) 279-0925	Cultural Competency: N	Accessibility: CONTACT PROVIDER
Provider Gender: Female	Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON	Website: N/A
NPI: 1508912130	Medi-Cal Open Panel: Yes	IPA: UCSD Medical Group
Provider English Spoken: Y	Min/Max Age: 0\None	
Provider Language(s) Spoken: French, Spanish	American Sign Language (ASL): N	
Cultural Competency: N	Accessibility: CONTACT PROVIDER	<b>PSYCHOLOGIST</b>
Hospital Affiliation: SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS	Website: N/A	<b>ABERCROMBIE, SHERI</b>
Medi-Cal Open Panel: Yes	IPA: UCSD Medical Group	<i>Provider ID: 290770</i>
Min/Max Age: 16\None		<i>Board Certified Specialty: No</i>
American Sign Language (ASL): N		<i>IHP OF SOUTHERN CAL-PHP</i>
Accessibility: CONTACT PROVIDER	<b>PSYCHIATRIC-MENTAL</b>	7011 LINDA VISTA RD SAN DIEGO, CA 92111
Website: N/A	<b>HEALTH NURSE</b>	Phone: (858) 810-8700
IPA: IHP of Southern Cal-PHP, UCSD Medical Group	<b>PRACTITIONER</b>	Fax: (858) 633-4680
	<b>SIETSMA, ALEXANDRA</b>	After Hours Phone: (858) 810-8700
	<i>Provider ID: 276909</i>	Provider Gender: Female
	<i>Board Certified Specialty: No</i>	NPI: 1932292422
	<b>UCSD MEDICAL GROUP</b>	Provider English Spoken: Y
	200 W ARBOR DR SAN DIEGO, CA 92103	Cultural Competency: N
	Phone: (800) 926-8273	Medi-Cal Open Panel: Yes
	Fax: (888) 539-8781	Min/Max Age: 18\None
	After Hours Phone: (800)	American Sign Language (ASL):

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

N

 *Accessibility: CONTACT PROVIDER*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*




---

### 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


#### 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




#### 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: 304195*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*  
*NPI: 1164701132*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*

*Medi-Cal Open Panel: Yes*

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---


### 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-0PM

W 8AM-4:30PM

TH 8AM-0PM

 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

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## D. 专家名录

### **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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录




Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### **PSYCHOLOGIST**

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#### **GIAMONA, KRISTEN**

Provider ID: 290801  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
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

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### **PSYCHOLOGIST**

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#### **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

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### **PSYCHOLOGIST**

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#### **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


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### **PSYCHOLOGIST**

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#### **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

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### **PSYCHOLOGIST**

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#### **LABIB, MICHAEL**

Provider ID: 301617  
Board Certified Specialty: No

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## D. 专家名录

### 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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### LEBENSOHN CHIALVO, FLORENCIA

Provider ID: 245224

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

Phone: (800) 926-8273

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1134788730

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### LINKE, SARAH

Provider ID: 273638

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1487026415

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

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## D. 专家名录

<b>PSYCHOLOGIST</b>	
<b>LINKE, SARAH</b> Provider ID: 273639 Board Certified Specialty: No UCSD MEDICAL GROUP 4910 DIRECTORS PL STE 250 SAN DIEGO, CA 92121 Phone: (800) 926-8273 Fax: (888) 539-8781 After Hours Phone: (800) 926-8273 Provider Gender: Female NPI: 1487026415 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD LA JOLLA JOHN SALLY THORNTON, UCSD MEDICAL CTR Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group	SAN DIEGO, CA 92121 Phone: (858) 534-8019 Fax: (858) 534-6727 After Hours Phone: (858) 534-8019 Provider Gender: Female NPI: 1043441165 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, RADY CHILDRENS HOSPITAL SAN DIEGO Medi-Cal Open Panel: Yes Min/Max Age: 0\None American Sign Language (ASL): N Accessibility: CONTACT PROVIDER Hours: M-F 8AM-5PM Website: N/A IPA: UCSD Medical Group
<b>PSYCHOLOGIST</b>	
<b>MAGINOT-CHESHER, TAMARA</b> Provider ID: 273223 Board Certified Specialty: No UCSD MEDICAL GROUP 4510 EXECUTIVE DR	<b>MCCULLUM, TIFFANY</b> 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
	<b>PSYCHOLOGIST</b>
	<b>MONTOYA, JESSICA</b> 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **PSYCHOLOGIST**

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#### **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*

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### **PSYCHOLOGIST**


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#### **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*

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### **PSYCHOLOGIST**

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#### **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*

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### **PSYCHOLOGIST**

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#### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

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### **PSYCHOLOGIST**

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**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

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### **PSYCHOLOGIST**

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**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

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### **PSYCHOLOGIST**

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**PATTERSON-HYATT, KIMBERLY**

Provider ID: 290730

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115

📞 Phone: (619) 662-4100  
Fax: (619) 205-6305

🕒 After Hours Phone: (619) 662-4100

Provider Gender: Female  
NPI: 1780997742

📄 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

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### **PSYCHOLOGIST**

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**PRINCE, RENEE**

Provider ID: 303603

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

📍 10737 CAMINO RUIZ STE 235  
SAN DIEGO, CA 92126

📞 Phone: (844) 200-2426  
Fax: (619) 474-4008

🕒 After Hours Phone: (844) 200-2426

Provider Gender: Female  
NPI: 1467737908

📄 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-6PM

🌐 Website: N/A

IPA: Community Care IPA LLC

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### **PSYCHOLOGIST**

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**RADOJEVIC, NATASHA**

Provider ID: 290690

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## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700  
Fax: (858) 633-4680

After Hours Phone: (858)  
810-8700

Provider Gender: Female

NPI: 1821365008

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TU  
8:30AM-5:30PM  
TH-F 8:30AM-5:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### PSYCHOLOGIST

#### RADOJEVIC, NATASHA

Provider ID: 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

#### SHELLINGER, KRISTON

Provider ID: 213751

Board Certified Specialty: No  
UCSD MEDICAL GROUP

9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131  
Phone: (858) 246-1979

After Hours Phone: (858)  
246-1979

Provider Gender: Female

NPI: 1710234273

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### PSYCHOLOGIST

#### SHELLINGER, KRISTON




Provider ID: 213752

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。






## D. 专家名录

 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (858) 246-1979  
 After Hours Phone: (858)  
246-1979

Provider Gender: Female  
NPI: 1710234273

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSD LA JOLLA JOHN  
SALLY THORNTON, UCSD  
MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

---

### **PSYCHOLOGIST**

#### **SCHELLINGER, KRISTON**

Provider ID: 213750  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 9333 GENESEE AVE STE  
200  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
 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


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### **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: 290285  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 6973 LINDA VISTA RD

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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## D. 专家名录

SAN DIEGO, CA 92111  
☎ Phone: (858) 279-0925  
Fax: (858) 633-4680  
🕒 After Hours Phone: (858) 279-0925  
Provider Gender: Male  
NPI: 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

**TWAMLEY, ELIZABETH**  
Provider ID: 290717  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101  
☎ Phone: (619) 233-8500  
Fax: (619) 687-1067  
🕒 After Hours Phone: (619) 233-8500  
Provider Gender: Female  
NPI: 1700089141

☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-W 8:30AM-5PM  
TH 8:30AM-9PM  
F 8:30AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### PUBLIC HEALTH PREVENTATIVE MEDICINE

**SOZANSKI, JESSE**  
Provider ID: 200925  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 9333 GENESEE AVE STE  
200  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
🕒 After Hours Phone: (800) 926-8273  
Provider Gender: Male  
NPI: 1437446622  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: UCSD Medical Group

### PULMONARY DISEASES

**BAILEY, JACOB**  
Provider ID: 299924  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
📍 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (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: 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**

#### **JOSHUA, JISHA**

Provider ID: 238062

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1023436417

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **PULMONARY DISEASES**

#### **JOSHUA, JISHA**

Provider ID: 238061

Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 4520 EXECUTIVE DR STE  
P2

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

Provider Gender: Female

NPI: 1023436417

☑ Provider English Spoken: Y

☑ Provider Language(s)  
Spoken: Hindi, Malayalam

Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: UCSD Medical Group

### **PULMONARY DISEASES**

#### **LE, HUAN**

Provider ID: 300636

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 5507 EL CAJON BLVD STE  
C

SAN DIEGO, CA 92115

☎ Phone: (619) 582-1448

Fax: (619) 582-1081

☎ After Hours Phone: (619) 582-1448

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## D. 专家名录

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

#### **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

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## D. 专家名录

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### 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: 262270

Board Certified Specialty: No  
IMPERIAL HEALTH HOLDINGS  
MEDICAL GROUP-SD

 16918 DOVE CANYON RD  
STE 103

SAN DIEGO, CA 92127

 Phone: (858) 649-5100

Fax: (858) 649-5099

 After Hours Phone: (858)  
649-5100

Provider Gender: Female

NPI: 1467625491

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: UCSD  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N  
 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-5PM  
F 8AM-8PM

 Website: N/A

IPA: Community Care IPA LLC,  
Imperial Health Holdings  
Medical Group-SD

### RADIATION ONCOLOGY

#### **HATTANGADI-GLUTH, JONA**

Provider ID: 254496

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 16918 DOVE CANYON RD

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## D. 专家名录

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**

#### **HOOPEES, 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**

#### **HOOPEES, 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**

#### **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


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## D. 专家名录

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A


IPA: Rady Childrens Health Network


### **RADIATION ONCOLOGY**

#### **VOLPP, PAUL**


Provider ID: 221105

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 3075 HEALTH CENTER DR  
SAN DIEGO, CA 92123


 Phone: (858) 939-5010

Fax: (858) 939-5021

 After Hours Phone: (858)  
939-5010

Provider Gender: Male

NPI: 1225186232

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

MEMORIAL HOSPITAL, SHARP

CHULA VISTA MED CTR,


GROSSMONT HOSPITAL,


PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 19\100

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

### **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**

#### **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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Provider English Spoken: Y Cultural Competency: N Hospital Affiliation: UCSD MEDICAL CTR, 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	American Sign Language (ASL): N  Accessibility: CONTACT PROVIDER  Hours: M-F 8AM-5PM  Website: N/A IPA: UCSD Medical Group	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
<hr/> <b>RADIOLOGY DIAGNOSTIC BRANCH, CODY</b> 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	<hr/> <b>RADIOLOGY DIAGNOSTIC CARSWELL, AIMEE</b> 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	<hr/> <b>RADIOLOGY DIAGNOSTIC CARSWELL, AIMEE</b> 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
<hr/> <b>RADIOLOGY DIAGNOSTIC CARSWELL, AIMEE</b> Provider ID: 304194	<hr/> <b>RADIOLOGY DIAGNOSTIC CARSWELL, AIMEE</b> Provider ID: 304194	



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

Cultural Competency: N  
Hospital Affiliation:  
EISENHOWER MEDICAL CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **CHENG, KAREN**

Provider ID: 283228  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST STE 202  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1427430511

 Provider English Spoken: Y  
Cultural Competency: N



Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT



#### PROVIDER

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **CHENG, KAREN**

Provider ID: 304207  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273



Provider Gender: Female  
NPI: 1427430511

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **CHENG, KAREN**

Provider ID: 283226  
Board Certified Specialty: No

#### UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1427430511



 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Hours: M-F 8AM-5PM  
 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **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



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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录




Provider Gender: 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: 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**

**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**

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

---

### **RADIOLOGY DIAGNOSTIC**

#### **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

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### **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**

#### **GRISSOM, MURRAY**

Provider ID: 271569

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录


Medi-Cal Open Panel: Yes


Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### 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: 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

#### **JAFFRAY, PAUL**

Provider ID: 304165

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 1275700999

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: Los

Angeles General Medical

Center

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

#### **JAFFRAY, PAUL**

Provider ID: 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

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## D. 专家名录

Min/Max Age: 0\None  
 American Sign Language (ASL): N  
 N  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
 IPA: UCSD Medical Group

N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: UCSD Medical Group

### RADIOLOGY DIAGNOSTIC

#### JAZBEH, SAMMER

Provider ID: 304167  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
 SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

Provider Gender: Male  
 NPI: 1770825457  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic

Cultural Competency: N  
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PROVIDENCE LITTLE CO OF MARY MED CTR TORRANCE, PROVIDENCE LITTLE CO OF MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Website: N/A

### RADIOLOGY DIAGNOSTIC

#### JAZBEH, SAMMER

Provider ID: 271126  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 200 W ARBOR DR  
 SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

Provider Gender: Male  
 NPI: 1770825457  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic

Cultural Competency: N  
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PROVIDENCE LITTLE CO OF MARY MED CTR TORRANCE, PROVIDENCE LITTLE CO OF MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

### RADIOLOGY DIAGNOSTIC

#### JAZBEH, SAMMER

Provider ID: 271127  
 Board Certified Specialty: No  
 UCSD MEDICAL GROUP  
 330 LEWIS ST STE 202  
 SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800) 926-8273

Provider Gender: Male  
 NPI: 1770825457  
 Provider English Spoken: Y  
 Provider Language(s) Spoken: Arabic

Cultural Competency: N  
 Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON, PROVIDENCE LITTLE CO OF MARY MED CTR TORRANCE, PROVIDENCE LITTLE CO OF MARY MED CTR SAN PEDRO

Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL): N

Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: UCSD Medical Group

### **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  
UCSD MEDICAL GROUP

📍 200 W 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)

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

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**

#### **RITCHIE, DAVID**

Provider ID: 300031  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

📍 200 W ARBOR DR  
SAN DIEGO, CA 92103  
☎ Phone: (800) 926-8273  
Fax: (888) 539-8781  
🕒 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1407201916

☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🌐 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **SADAT, SAYED**

Provider ID: 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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **RADIOLOGY DIAGNOSTIC**


#### **SADAT, SAYED**

*Provider ID: 299969*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 330 LEWIS ST  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*


*NPI: 1679000806*


 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **RADIOLOGY DIAGNOSTIC**

#### **SADAT, SAYED**

*Provider ID: 304202*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Male*

*NPI: 1679000806*

 *Provider English Spoken: Y  
Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---


### **RADIOLOGY DIAGNOSTIC**


#### **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**


#### **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**

#### **SEARLEMAN, ADAM**

*Provider ID: 299948*

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## D. 专家名录

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1134570641

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **SEARLEMAN, ADAM**

Provider ID: 299949

Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1134570641

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **SLATER, JERRY**

Provider ID: 283312

Board Certified Specialty: No  
UCSD MEDICAL GROUP

330 LEWIS ST STE 202  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1851746382

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, LOMA LINDA  
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **SLATER, JERRY**

Provider ID: 283310

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1851746382

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY

THORNTON, LOMA LINDA  
UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
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

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## D. 专家名录

---

 330 LEWIS ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 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: 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**

**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**

**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






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## D. 专家名录

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 17\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC

### **RADIOLOGY DIAGNOSTIC**




#### **SWEET, JASON**



Provider ID: 305028  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1326197393  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

#### **TADDONIO, MICHAEL**








Provider ID: 304179  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1386987261

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**





#### **TADDONIO, MICHAEL**

Provider ID: 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: 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




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## D. 专家名录

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None




American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**

#### **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  
Medi-Cal Open Panel: Yes  
Min/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: 300035  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 330 LEWIS ST  
SAN DIEGO, CA 92103


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Phone: (800) 926-8273  
 Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285165183

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### **RADIOLOGY DIAGNOSTIC**


#### **UNSDORFER, KYLE**


Provider ID: 300034

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1285165183

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

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


### **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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 Website: N/A  
IPA: Community Care IPA LLC


### **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**

#### **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**

#### **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**

#### **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

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group

### **RADIOLOGY DIAGNOSTIC**

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### 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

Medi-Cal Open 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

Medi-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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

 *Accessibility: CONTACT PROVIDER*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### REGISTERED DIETITIAN / NUTRITIONIST

---

#### **FISHER, JENNIFER**

*Provider ID: 286340*

*Board Certified Specialty: No  
UCSD MEDICAL GROUP*

 4303 LA JOLLA VILLAGE  
DR STE 2110

SAN DIEGO, CA 92122

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800)  
926-8273*

*Provider Gender: Female*

*NPI: 1538312657*


 *Provider English Spoken: Y  
Cultural Competency: N*


*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

 *Website: N/A*

*IPA: UCSD Medical Group*

---

### REGISTERED DIETITIAN / NUTRITIONIST

---


#### **SIEVERING, DENISE**

*Provider ID: 268250*

*Board Certified Specialty: No*

*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*

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### 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: UCSD Medical Group

---

### **REGISTERED PHYSICAL THERAPIST**

---

#### **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

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### **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

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### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录





 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

---




### REGISTERED PHYSICAL THERAPIST

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#### **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

---

#### **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):*



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*




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### 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

---

### 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### 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


---

#### **FARRAR, COURTNEY**

Provider ID: 295259

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619) 325-1161

Provider Gender: Male

NPI: 1124577952

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### REGISTERED PHYSICAL THERAPIST


---

#### **FARRAR, COURTNEY**


Provider ID: 303843

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 3434 MIDWAY DR STE 2001  
SAN DIEGO, CA 92110

 Phone: (619) 325-1161

Fax: (619) 325-1717

 After Hours Phone: (619) 325-1161

Provider Gender: Male

NPI: 1124577952

 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### REGISTERED PHYSICAL THERAPIST

---

#### **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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

<p>N</p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>	<hr/> <p style="text-align: center;"><b><u>THERAPIST</u></b></p> <hr/> <p><b>MC ELROY, CARTER</b></p> <p><i>Provider ID: 206522</i></p> <p><i>Board Certified Specialty: No</i></p> <p><b>UCSD MEDICAL GROUP</b></p> <p> 8929 UNIVERSITY CENTER LN STE 200 SAN DIEGO, CA 92122</p> <p> <i>Phone: (855) 543-0333</i></p> <p><i>Fax: (858) 657-6873</i></p> <p> <i>After Hours Phone: (855) 543-0333</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1114472230</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Thai</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>	<p>SAN DIEGO, CA 92127</p> <p> <i>Phone: (800) 926-8273</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1629558499</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>
<hr/> <p style="text-align: center;"><b><u>REGISTERED PHYSICAL THERAPIST</u></b></p> <hr/> <p><b>MC ELROY, CARTER</b></p> <p><i>Provider ID: 206523</i></p> <p><i>Board Certified Specialty: No</i></p> <p><b>UCSD MEDICAL GROUP</b></p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Male</i></p> <p><i>NPI: 1114472230</i></p> <p> <i>Provider English Spoken: Y</i></p> <p> <i>Provider Language(s) Spoken: Thai</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Hospital Affiliation: UCSD MEDICAL CTR</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p> <p><i>Min/Max Age: 0\None</i></p> <p><i>American Sign Language (ASL): N</i></p> <p> <i>Accessibility: CONTACT PROVIDER</i></p> <p> <i>Hours: M-F 8AM-5PM</i></p> <p> <i>Website: N/A</i></p> <p><i>IPA: UCSD Medical Group</i></p>	<hr/> <p style="text-align: center;"><b><u>REGISTERED PHYSICAL THERAPIST</u></b></p> <hr/> <p><b>NGUYEN, HARRY</b></p> <p><i>Provider ID: 271871</i></p> <p><i>Board Certified Specialty: No</i></p> <p><b>UCSD MEDICAL GROUP</b></p> <p> 16950 VIA TAZON</p>	<hr/> <p style="text-align: center;"><b><u>REGISTERED PHYSICAL THERAPIST</u></b></p> <hr/> <p><b>RICKERTS, MATTHEW</b></p> <p><i>Provider ID: 287652</i></p> <p><i>Board Certified Specialty: No</i></p> <p><b>UCSD MEDICAL GROUP</b></p> <p> 16950 VIA TAZON SAN DIEGO, CA 92127</p> <p> <i>Phone: (800) 926-8273</i></p> <p><i>Fax: (888) 539-8781</i></p> <p> <i>After Hours Phone: (800) 926-8273</i></p> <p><i>Provider Gender: Female</i></p> <p><i>NPI: 1063882579</i></p> <p> <i>Provider English Spoken: Y</i></p> <p><i>Cultural Competency: N</i></p> <p><i>Medi-Cal Open Panel: Yes</i></p>

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

---

### REGISTERED PHYSICAL THERAPIST


---


#### **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

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#### **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

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## D. 专家名录

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: 259684

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR STE 1  
SAN DIEGO, CA 92121

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1689962169

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### 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

### SLEEP MEDICINE

#### **FINCH, CHRISTINA**

Provider ID: 299938

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 4520 EXECUTIVE DR

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## D. 专家名录

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: 296929  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 11440 W BERNARDO CT  
STE 300  
SAN DIEGO, CA 92127  
☎ Phone: (877) 757-8353  
Fax: (818) 357-2505  
📞 After Hours Phone: (877) 757-8353  
Provider Gender: Female  
NPI: 1063660165  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**

**AROCHO-SALGADO, MIRELIS**  
Provider ID: 296932  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 7510 CLAIREMONT MESA  
BLVD STE 103  
SAN DIEGO, CA 92111  
☎ Phone: (877) 757-8353  
Fax: (818) 357-2505  
📞 After Hours Phone: (877) 757-8353  
Provider Gender: Female  
NPI: 1063660165  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **SPEECH PATHOLOGIST**

**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)

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## D. 专家名录

757-8353  
Provider Gender: Female  
NPI: 1063660165  
☐ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### SPEECH PATHOLOGIST

#### **CLARK, MELISSA**

Provider ID: 296922  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 7510 CLAIREMONT MESA  
BLVD STE 102  
SAN DIEGO, CA 92111

☎ Phone: (877) 757-8353  
Fax: (818) 357-2505

📞 After Hours Phone: (877)  
757-8353

Provider Gender: Female  
NPI: 1760546428

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: SU 7AM-9PM  
M-F 7AM-9PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### SPEECH PATHOLOGIST

#### **CLARK, MELISSA**

Provider ID: 296921  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 9655 GRANITE RIDGE DR  
STE 200  
SAN DIEGO, CA 92123

☎ Phone: (877) 757-8353  
Fax: (818) 357-2505

📞 After Hours Phone: (877)  
757-8353

Provider Gender: Female  
NPI: 1760546428

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: SU 7AM-7PM  
M-F 7AM-7PM

🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### SPEECH PATHOLOGIST

#### **CLARK, MELISSA**

Provider ID: 296920  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 11440 W BERNARDO CT  
STE 300  
SAN DIEGO, CA 92127

☎ Phone: (877) 757-8353  
Fax: (818) 357-2505

📞 After Hours Phone: (877)  
757-8353

Provider Gender: Female  
NPI: 1760546428

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Arabic, Armenian,  
Farsi, Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: SU 7AM-7PM  
M-F 7AM-7PM

🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### SPEECH PATHOLOGIST

#### **DURNAN, CASSANDRA**

Provider ID: 307882  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 11440 W BERNARDO CT  
STE 300  
SAN DIEGO, CA 92127

☎ Phone: (877) 757-8353

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Fax: (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


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## D. 专家名录

---

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录


THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group


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### **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**


**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**


**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**

**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

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## D. 专家名录

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**


#### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (800) 926-8273

Provider Gender: Male

NPI: 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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **SURGERY GENERAL**

#### **BARNES, RYAN**

Provider ID: 129062

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

7910 FROST ST STE 250  
SAN DIEGO, CA 92123

Phone: (858) 565-0104

Fax: (858) 565-0194

After Hours Phone: (858)  
565-0104

Provider Gender: Male

NPI: 1831493501

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP  
MEMORIAL HOSPITAL, SHARP  
CORONADO HOSP AND  
HEALTHCARE CTR, PALOMAR  
HEALTH

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-4:30PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **SURGERY GENERAL**

#### **BENCH, SHAWN**

Provider ID: 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




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider Gender: Female  
NPI: 1558566372





 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON, RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **SURGERY GENERAL**

#### **BRODERICK, RYAN**





Provider ID: 201617  
Board Certified Specialty: Yes  
UCSD MEDICAL GROUP  
 4520 EXECUTIVE DR STE 111  
SAN DIEGO, CA 92121  
 Phone: (858) 657-8860  
 After Hours Phone: (858)  
657-8860  
Provider Gender: Male  
NPI: 1619252418  
 Provider English Spoken: Y




Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY GENERAL**








#### **BRODERICK, RYAN**

Provider ID: 286342  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 4303 LA JOLLA VILLAGE  
DR STE 2110  
SAN DIEGO, CA 92122  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1619252418  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

### **SURGERY GENERAL**

#### **BRODERICK, RYAN**

Provider ID: 247073  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1619252418  
 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: UCSD Medical Group

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## D. 专家名录

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**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

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**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

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**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 1437470762

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: PALOMAR  
HEALTH, PARADISE VALLEY  
HOSPITAL, SCRIPPS MERCY

HOSPITAL CHULA VISTA,  
SCRIPPS MERCY HOSPITAL,  
PALOMAR MEDICAL CENTER


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### SURGERY GENERAL

#### **FAIRBANKS, TIMOTHY**

Provider ID: 260842

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1407010556

 Provider English Spoken: Y

Cultural Competency: N

Hospital Affiliation: RADY

CHILDRENS HOSPITAL SAN  
DIEGO, UCSD MEDICAL CTR,  
SHARP MEMORIAL HOSPITAL,  
SCRIPPS MEMORIAL  
HOSPITAL, UCSF BENIOFF  
CHILDREN'S HOSPITAL  
OAKLAND


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

### SURGERY GENERAL


#### **HORGAN, SANTIAGO**

Provider ID: 286367

Board Certified Specialty: No  
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):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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: 201729*  
*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*  
 4520 EXECUTIVE DR STE 111  
SAN DIEGO, CA 92121  
 *Phone: (858) 657-8860*  
 *After Hours Phone: (858) 657-8860*  
*Provider Gender: Male*  
*NPI: 1265649966*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*

N



 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

### **SURGERY GENERAL**




#### **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: 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*

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## D. 专家名录

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/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

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## D. 专家名录

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**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

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**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

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**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




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**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

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## D. 专家名录








 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **SURGERY GENERAL** **VASCULAR**

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#### **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*

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### **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*  
*IPA: IHP of Southern Cal-PHP*

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### **SURGERY HAND ORTHOPEDIC**

#### **STEPHENSON, SAMUEL**

*Provider ID: 284934*  
*Board Certified Specialty: No*

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### **UCSD MEDICAL GROUP**

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
*Provider Gender: Male*  
*NPI: 1578058665*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Hospital Affiliation: UCSD MEDICAL CTR, UCSD LA JOLLA JOHN SALLY THORNTON*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM*  
 *Website: N/A*  
*IPA: UCSD Medical Group*

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### **SURGERY NEUROLOGICAL**

#### **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*





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## D. 专家名录

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO, 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

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## D. 专家名录

 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: 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**

#### **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**

#### **PHAM, MARTIN**

Provider ID: 244158

Board Certified Specialty: No

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## D. 专家名录

### UCSD MEDICAL GROUP

16950 VIA TAZON  
SAN DIEGO, CA 92127  
Phone: (800) 926-8273  
After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1609130921

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **SURGERY NEUROLOGICAL**

#### **SOUMEKH, MASSOUD**

Provider ID: 257468

Board Certified Specialty: Yes

BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

8008 FROST ST STE 401  
SAN DIEGO, CA 92123

Phone: (858) 560-8544

Fax: (858) 560-8546

After Hours Phone: (858)  
560-8544

Provider Gender: Male

NPI: 1265495014

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: ALVARADO  
HOSPITAL LLC, SHARP

MEMORIAL HOSPITAL, SHARP  
CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 9AM-4:30PM

Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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: ALVARADO  
HOSPITAL LLC, SHARP

CORONADO HOSP AND

HEALTHCARE CTR, SHARP

MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

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: 277948

Board Certified Specialty: No  
UCSD MEDICAL GROUP

200 W ARBOR DR  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1932140639*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **SURGERY ORTHOPEDIC**

#### **BUKATA, SUSAN**

*Provider ID: 304181*

*Board Certified Specialty: No*  
*UCSD MEDICAL GROUP*

📍 *6655 ALVARADO RD*  
*SAN DIEGO, CA 92120*

☎ *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*

☎ *After Hours Phone: (800) 926-8273*

*Provider Gender: Female*

*NPI: 1932140639*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\None*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🌐 *Website: N/A*

*IPA: UCSD Medical Group*

### **SURGERY ORTHOPEDIC**

#### **CAMPBELL, TANNER**

*Provider ID: 301633*

*Board Certified Specialty: No*  
*RADY CHILDRENS HEALTH*

*NETWORK*

📍 *3020 CHILDRENS WAY*  
*SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-6789*  
*Fax: (858) 966-8519*

☎ *After Hours Phone: (858) 966-6789*

*Provider Gender: Male*

*NPI: 1821593096*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO*

*Medi-Cal Open Panel: No*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

### **SURGERY ORTHOPEDIC**

#### **CHENG, YU-TSUN**

*Provider ID: 301903*

*Board Certified Specialty: No*

*RADY CHILDRENS HEALTH NETWORK*

📍 *3030 CHILDRENS WAY FL 3*

*SAN DIEGO, CA 92123*

☎ *Phone: (858) 966-6789*  
*Fax: (858) 966-6706*

☎ *After Hours Phone: (858) 966-6789*

*Provider Gender: Male*

*NPI: 1992982854*

☑ *Provider English Spoken: Y*  
*Cultural Competency: N*

*Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO, SOUTHWEST*

*HEALTHCARE INLAND*

*VALLEY HOSPITAL,*

*SOUTHWEST HEALTHCARE*

*RANCHO SPRINGS HOSPITAL*

*Medi-Cal Open Panel: Yes*

*Min/Max Age: 0\19*

*American Sign Language (ASL): N*

♿

*Accessibility: CONTACT PROVIDER*

🕒 *Hours: M-F 8AM-5PM*

🌐 *Website: N/A*

*IPA: Rady Childrens Health Network*

### **SURGERY ORTHOPEDIC**

#### **CHIARAPPA, FRANK**


*Provider ID: 304174*

*Board Certified Specialty: No*

*UCSD MEDICAL GROUP*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8800  
 After Hours Phone: (858)  
966-8800

Provider Gender: Male  
NPI: 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**


#### **FLINT, JAMES**

Provider ID: 203178

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (858) 657-8200  
 After Hours Phone: (858)  
657-8200


Provider Gender: Male  
NPI: 1629239140

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A



IPA: UCSD Medical Group

### **SURGERY ORTHOPEDIC**

#### **FLINT, JAMES**


Provider ID: 304177

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male  
NPI: 1629239140

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY  
THORNTON, UCSD MEDICAL  
CTR

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None


American Sign Language (ASL):  
N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### PROVIDER


 Website: N/A  
IPA: UCSD Medical Group

### SURGERY ORTHOPEDIC

#### GOEB, YANNICK

Provider ID: 284794  
Board Certified Specialty: No  
UCSD MEDICAL GROUP


 200 W ARBOR DR  
SAN DIEGO, CA 92103


 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1730542747

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: German, Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN DIEGO, CA 92123  
☎ Phone: (858) 966-6789  
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: 205914  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

📍 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
☎ Phone: (858) 966-8800  
🕒 After Hours Phone: (858) 966-8800

Provider Gender: Male  
NPI: 1548417652  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO  
Medi-Cal Open Panel: No  
Min/Max Age: 0\19  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🌐 Website: N/A  
IPA: Rady Childrens Health Network

### **SURGERY ORTHOPEDIC**

**UPASANI, VIDYADHAR**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 260953  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

3030 CHILDRENS WAY FL 3

SAN DIEGO, CA 92123

Phone: (858) 966-6789

Fax: (858) 966-6706

After Hours Phone: (858) 966-6789

Provider Gender: Male

NPI: 1548417652

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY CHILDRENS HOSPITAL SAN DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health Network

### **SURGERY PEDIATRIC**

#### **BICKLER, STEPHEN**

Provider ID: 270090

Board Certified Specialty: No  
RADY CHILDRENS HEALTH 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

CHILDRENS HOSPITAL SAN DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health Network

### 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

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

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## D. 专家名录

### 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: No  
RADY CHILDRENS HEALTH  
NETWORK

 8110 BIRMINGHAM WAY FL  
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1538365002

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network

---


### SURGERY PEDIATRIC

#### THANGARAJAH, HARIHARAN

Provider ID: 206172  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 8110 BIRMINGHAM WAY FL  
2

SAN DIEGO, CA 92123

 Phone: (858) 966-7711

Fax: (858) 966-7712

 After Hours Phone: (858)  
966-7711

Provider Gender: Male

NPI: 1598979593

 Provider English Spoken: Y  
Cultural Competency: N


Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO


Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


---


### SURGERY PEDIATRIC

#### THANGARAJAH, HARIHARAN

Provider ID: 256194  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

 3030 CHILDRENS WAY FL 1  
SAN DIEGO, CA 92123

 Phone: (858) 966-7711

 After Hours Phone: (858)  
966-7711

Provider Gender: Male

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## D. 专家名录

NPI: 1598979593


 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Rady Childrens Health  
Network


### **SURGERY PLASTIC**

#### **HINCHCLIFF, KATHARINE**

Provider ID: 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**

#### **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**


#### **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

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## D. 专家名录

### **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: 255576

Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

7920 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 966-5999

Fax: (858) 966-8394

After Hours Phone: (858)  
966-5999

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\19

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

### **SURGERY PLASTIC**

#### **KOLB, FREDERIC**

Provider ID: 255575

Board Certified Specialty: No  
UCSD MEDICAL GROUP

4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)

926-8273

Provider Gender: Female

NPI: 1790341832

Provider English Spoken: Y

Provider Language(s)  
Spoken: French

Cultural Competency: N

Hospital Affiliation: UCSD LA

JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Rady Childrens Health

Network, UCSD Medical Group

### **SURGERY PLASTIC**

#### **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

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## D. 专家名录


Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\19  
American Sign Language (ASL):




N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Rady Childrens Health  
Network

### **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 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 THORACIC**


**FOX, KENNETH**  
Provider ID: 257841  
Board Certified Specialty: No  
RADY CHILDRENS HEALTH  
NETWORK

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## D. 专家名录

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123  
 Phone: (858) 966-8030  
 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


 Provider English Spoken: Y

Cultural Competency: N  
Hospital Affiliation: RADY  
CHILDRENS HOSPITAL SAN  
DIEGO

Medi-Cal Open Panel: Yes  
Min/Max 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

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## D. 专家名录

### 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

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## D. 专家名录

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

**AHMADIEH, KIAN**

Provider ID: 309729

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1932697190

 Provider English Spoken: Y  
Cultural Competency: N

Medi-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

**KATZ, JONATHAN**

Provider ID: 299918

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Male

NPI: 1952756207

 Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Website: N/A

IPA: UCSD Medical Group


### 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

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## D. 专家名录

MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON  
Medi-Cal Open Panel: Yes  
Min/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: 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

#### **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

#### **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

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## D. 专家名录

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

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## D. 专家名录

 Hours: M-F 8AM-5PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### **UROLOGY**


#### **WANG, LUKE**

Provider ID: 299933  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
Provider Gender: Male  
NPI: 1033630173  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: UCSD Medical Group

### **SAN MARCOS**

#### **CARDIOVASCULAR DISEASE**


#### **LERNER, JONATHAN**

Provider ID: 303448  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 955 BOARDWALK STE 100

SAN MARCOS, CA 92078  
 Phone: (760) 798-8855  
Fax: (619) 616-2104  
 After Hours Phone: (760)  
798-8855

Provider Gender: Male

NPI: 1962899823

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SHARP

CHULA VISTA MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC

#### **CERTIFIED ACUPUNCTURIST**


#### **CARRA, BARBARA**

Provider ID: 303128

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1595 GRAND AVE STE 100  
SAN MARCOS, CA 92078


 Phone: (760) 736-6767


Fax: (760) 736-8740

 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1588173629

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French, Italian,  
Spanish


Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP

#### **CERTIFIED ACUPUNCTURIST**


#### **CARRA, BARBARA**

Provider ID: 308116

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1588173629

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: French, Italian,  
Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

### **CERTIFIED ACUPUNCTURIST**

#### **GONZALEZ, ANDRES**

Provider ID: 298658  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 1595 GRAND AVE STE 100  
SAN MARCOS, CA 92078  
📞 Phone: (760) 736-6767  
📠 Fax: (760) 736-6744  
🕒 After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1841857729

☐ Provider English Spoken: Y  
☐ Provider Language(s)  
Spoken: Chinese, Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **CERTIFIED NURSE PRACTITIONER**

#### **BLAND, JACELIS**

Provider ID: 296766

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP  
📍 150 VALPRED A RD  
SAN MARCOS, CA 92069  
📞 Phone: (760) 736-6767  
📠 Fax: (760) 736-6744

🕒 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 VALPRED A RD  
SAN MARCOS, CA 92069

📞 Phone: (760) 736-6767

📠 Fax: (760) 736-6744

🕒 After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 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

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## D. 专家名录

**PROVIDER**  
🕒 Hours: M-F 8AM-6PM  
SA 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**FREEMAN, WANDA**  
Provider ID: 305751  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 150 VALPREDA RD  
SAN MARCOS, CA 92069  
📞 Phone: (760) 736-6767  
Fax: (760) 736-6744  
🕒 After Hours Phone: (760)  
736-6767

Provider Gender: Female  
NPI: 1659504264  
🗣️ Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM  
SA 8AM-5PM

🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE** **PRACTITIONER**

---

**GARCIA, REGINA**  
Provider ID: 297837

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 150 VALPREDA RD  
SAN MARCOS, CA 92069  
📞 Phone: (760) 736-6767  
Fax: (760) 736-6744

🕒 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  
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

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## D. 专家名录

**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**

---

**VAHDAT, VALERIE**  
Provider ID: 294758  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
📍 2085 MONTIEL RD STE 102  
SAN MARCOS, CA 92069  
📞 Phone: (833) 867-4642  
Fax: (360) 462-5827  
🕒 After Hours Phone: (833)  
867-4642  
Provider Gender: Female  
NPI: 1093474090  
📄 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-F 8AM-5PM  
🌐 Website: N/A  
IPA: IHP of Southern Cal-PHP

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### CERTIFIED NURSE PRACTITIONER

#### **YCASAS, EMILY**

Provider ID: 307853

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

150 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 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 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-6744

After Hours Phone: (760)

736-6767

Provider Gender: Female

NPI: 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 VALPRED A RD  
SAN MARCOS, CA 92069

Phone: (760) 736-6767

Fax: (760) 736-8740

After Hours Phone: (760)  
736-6767

Provider Gender: Female

NPI: 1801255484

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
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




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## D. 专家名录






 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: 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

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录









 Website: N/A  
IPA: IHP of Southern Cal-PHP

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### INTERVENTIONAL CARDIOLOGY

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#### **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

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### INTERVENTIONAL CARDIOLOGY

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#### **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






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### INTERVENTIONAL CARDIOLOGY

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#### **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

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#### **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






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## D. 专家名录

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

#### HOSSEINZADEHMALEKI, 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

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## D. 专家名录

*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-0:30PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **NEUROLOGY**

#### **SORIALOPEZ, 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**

#### **CABRERA, MICHELLE**

Provider ID: 303025  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
150 VALPREDA RD  
SAN MARCOS, CA 92069  
Phone: (760) 736-6767  
Fax: (760) 736-6744  
After Hours Phone: (760) 736-6767  
Provider Gender: Female  
NPI: 1174774723  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: French, Spanish  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

Hospital Affiliation: Adventist Health and Rideout


Medi-Cal Open Panel: Yes

Min/Max Age: 16\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **OBSTETRICS / GYNECOLOGY**

#### **HINSHAW, PAUL**

Provider ID: 288907

Board Certified Specialty: No  
RADY CHILDRENS HEALTH NETWORK

 120 CRAVEN RD STE 101  
SAN MARCOS, CA 92078

 Phone: (760) 740-2710

Fax: (858) 207-0003

 After Hours Phone: (760)  
740-2710

Provider Gender: Male

NPI: 1215170717

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: PALOMAR MEDICAL CENTER

Medi-Cal Open Panel: Yes


Min/Max Age: 0\19

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,  
Rady Childrens Health  
Network


### **PEDIATRICS**

#### **LUMHO, 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**

#### **LUMHO, 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**

#### **POSADAS, EMERITO**

Provider ID: 257536

Board Certified Specialty: No  
BLUE SHIELD PROMISE HEALTH PLAN DIRECT

 150 VALPREDA RD  
SAN MARCOS, CA 92069

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## D. 专家名录

☎ Phone: (760) 736-6767

Fax: (760) 566-1501

📞 After Hours Phone: (760)  
736-6767

Provider Gender: Male

NPI: 1720093198

☐ Provider English Spoken: Y

☐ Provider Language(s)

Spoken: Spanish, Tagalog  
Cultural Competency: N

Hospital Affiliation: TRI CITY

MEDICAL CTR, PALOMAR

MEDICAL CENTER

Medi-Cal Open Panel: Yes

Min/Max Age: 0\18

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-6PM

🌐 Website: N/A

IPA: BLUE SHIELD PROMISE

HEALTH PLAN DIRECT

### PEDIATRICS

#### **QUINTERO, CAROLYN**

Provider ID: 303142

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 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

#### **CELESTINO, MISH EL**

Provider ID: 302439

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 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

#### **HERNANDEZ, MIRIAM**

Provider ID: 298336

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

Fax: (760) 736-6744

📞 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

#### **POLLEY, SHANNON**

Provider ID: 296093

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 150 VALPRED A RD  
SAN MARCOS, CA 92069

☎ Phone: (760) 736-6767

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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

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## D. 专家名录




American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
 Website: N/A  
IPA: IHP of Southern Cal-PHP




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### PSYCHOLOGIST

---

#### GEORGIEV, MARY-JO

Provider ID: 290793  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 150 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 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



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### PSYCHOLOGIST

---

#### IMAM, SYED

Provider ID: 298174  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 150 VALPRED A RD

SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 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

---

#### SIMPSON, ERIC

Provider ID: 290803  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 150 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-6744  
 After Hours Phone: (760)  
736-6767  
Provider Gender: Male  
NPI: 1710110416

 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes




Min/Max Age: 0\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
IPA: IHP of Southern Cal-PHP

---

### PSYCHOLOGIST

---

#### TORRES, HECTOR

Provider ID: 290788  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 150 VALPRED A RD  
SAN MARCOS, CA 92069  
 Phone: (760) 736-6767  
Fax: (760) 736-6744  
 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

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### RHEUMATOLOGY

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#### ALNAHLAWI, BASMA

Provider ID: 290068

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*

334 VIA VERA CRUZ STE  
251

SAN MARCOS, CA 92078

Phone: (760) 736-8091

Fax: (760) 736-8092

After Hours Phone: (760)  
736-8091

Provider Gender: Female

NPI: 1144455262

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### RHEUMATOLOGY

**ALNAHLAWI, BASMA**

Provider ID: 295532

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

960 W SAN MARCOS BLVD  
STE 210

SAN MARCOS, CA 92078

Phone: (760) 736-8091

Fax: (760) 736-8092

After Hours Phone: (760)  
736-8091

Provider Gender: Female

NPI: 1144455262

Provider English Spoken: Y

Provider Language(s)  
Spoken: Arabic

Cultural Competency: N

Hospital Affiliation: LOMA

LINDA UNIVERSITY MED CTR

MURRIETA, PALOMAR

MEDICAL CENTER, LOMA

LINDA UNIVERSITY MED CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SAN YSIDRO**

### CERTIFIED NURSE

### PRACTITIONER

**KANTAS, PARIS**

Provider ID: 306684

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4004 BEYER BLVD  
SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-6341

After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1114329612

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SHARP

CORONADO HOSP AND

HEALTHCARE CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 2\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE

### PRACTITIONER

**ROSCOE, SYDNEY**

Provider ID: 306249

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

4050 BEYER BLVD

SAN YSIDRO, CA 92173

Phone: (619) 662-4100

Fax: (619) 205-5305

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1992448864

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

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## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP,  
UCSD Medical Group


### **FAMILY PRACTICE**

**ALVAREZ-ESTRADA, MIGUEL**

Provider ID: 294925

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4050 BEYER BLVD  
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

Provider Gender: Male

NPI: 1588197826

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS

MERCY HOSPITAL CHULA

VISTA, SCRIPPS MERCY

HOSPITAL, PARADISE VALLEY  
HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT

PROVIDER

 Website: N/A


IPA: IHP of Southern Cal-PHP


### **FAMILY PRACTICE**

**ARRIETA, NOEMI**


Provider ID: 297794

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173


 Phone: (619) 662-4100

Fax: (619) 205-6341

 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1912223496

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: SCRIPPS


MEMORIAL HOSPITAL


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: IHP of Southern Cal-PHP


### **FAMILY PRACTICE**


**DALUGDUGAN, ESTHER**

Provider ID: 302285

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 205-6305

 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**

**NAVARRO, VANESSAMARIA**


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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

NPI: 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

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

### **GENERAL PRACTICE**

#### **SAMI, REMAN**

Provider ID: 305484

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

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## D. 专家名录

☎ Phone: (619) 662-4100

Fax: (619) 205-6305

📞 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1295362242

🗉 Provider English Spoken: Y

🗉 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🕒 Hours: M-F 8AM-5PM

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **INFECTIOUS DISEASE**

#### **ALDOUS, JEANNETTE**

Provider ID: 290421

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

📍 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

☎ Phone: (619) 662-4100  
Fax: (619) 205-6305

📞 After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1073650339

🗉 Provider English Spoken: Y

🗉 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

🌐 Website: N/A

IPA: IHP of Southern Cal-PHP

### **INFECTIOUS DISEASE**

#### **RAMIREZSANCHEZ, 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

### **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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

SAN 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

### **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

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## D. 专家名录

### 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):

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

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## D. 专家名录

### 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

### PHYSICIANS ASSISTANT

#### ROSENBLATT, SHERILYN

Provider ID: 295738

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

120 TOWN CENTER PKWY  
SANTEE, CA 92071

Phone: (619) 662-4100

Fax: (619) 205-6305

After Hours Phone: (619)  
662-4100

Provider Gender: Female

NPI: 1114041621

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: SU 10AM-4PM

M-F 8:30AM-5:30PM

SA 10AM-2:30PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### 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

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## D. 专家名录

### **CERTIFIED NURSE PRACTITIONER**

#### **VAHDAT, VALERIE**

Provider ID: 306580

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

41840 ENTERPRISE CIR N  
TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (360) 462-2751

After Hours Phone: (951)  
225-6400

Provider Gender: Female

NPI: 1093474090

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **PHYSICIANS ASSISTANT**

#### **ANWAR, YASMIN**

Provider ID: 300846

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

31515 RANCHO PUEBLO  
RD STE 102  
TEMECULA, CA 92592

Phone: (951) 225-7873

Fax: (951) 305-9117

After Hours Phone: (951)  
225-7873

Provider Gender: Female

NPI: 1588602247

Provider English Spoken: Y

Provider Language(s)  
Spoken: Persian, Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **PSYCHOLOGIST**

#### **WOODWORTH, JENNIFER**

Provider ID: 290633

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

41840 ENTERPRISE CIR N  
TEMECULA, CA 92590

Phone: (951) 225-6400

Fax: (360) 462-2751

After Hours Phone: (951)  
225-6400

Provider Gender: Female

NPI: 1639362494

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-5PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **SURGERY GENERAL VASCULAR**

#### **HOWE, STEVEN**

Provider ID: 206759

Board Certified Specialty: No  
UCSD MEDICAL GROUP

31700 TEMECULA VALLEY  
PARKWAY

TEMECULA, CA 92592

Phone: (951) 303-2349

Fax: (951) 303-8591

After Hours Phone: (951)  
303-2349

Provider Gender: Male

NPI: 1497702740

Provider English Spoken: Y  
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

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## D. 专家名录

### VISTA

#### ANESTHESIOLOGY PAIN MANAGEMENT

##### GUPTA, ANUJ

Provider ID: 297703

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

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

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

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## D. 专家名录

 *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*

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### **CERTIFIED ACUPUNCTURIST**

#### **SONG, CAROL**






*Provider ID: 290550*  
*Board Certified Specialty: No*  
*IHP OF SOUTHERN CAL-PHP*  
 1000 VALE TERRACE DR  
VISTA, CA 92084  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
*Provider Gender: Female*  
*NPI: 1518166685*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
*Medi-Cal Open Panel: Yes*  
*Min/Max Age: 0\None*  
*American Sign Language (ASL):*




N  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TH 8AM-8PM*  
*F 9AM-5PM*  
*SA 9AM-4PM*  
 *Website: N/A*  
*IPA: IHP of Southern Cal-PHP*

---

### **CERTIFIED NURSE**

#### **PRACTITIONER**






**APRIL, MONIQUE**  
*Provider ID: 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: 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):*

---

### **CERTIFIED NURSE**

#### **PRACTITIONER**

**APRIL, MONIQUE**  
*Provider ID: 307939*  
*Board Certified Specialty: No*  
*COMMUNITY CARE IPA LLC*  
 1000 VALE TERRACE DR  
VISTA, CA 92084

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## D. 专家名录

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): HEALTH PLAN DIRECT

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**

#### **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

### **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**

#### **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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### **BERNETICH, MEGHAN**

Provider ID: 302526

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3702

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1629354360

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\24

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM  
SA 9AM-4PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

#### **CERTIFIED NURSE** **PRACTITIONER**

### **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**

### **CHRISTY, TYLER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Provider ID: 303928  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

517 N HORNE ST  
VISTA, CA 92083

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

---

**CHRISTY, TYLER**

Provider ID: 303927

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

---

**CHRISTY, TYLER**

Provider ID: 303932

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

---

**CHRISTY, TYLER**

Provider ID: 303929

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

105 DURIAN ST STE A  
VISTA, CA 92083

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **CERTIFIED NURSE PRACTITIONER**

---

**CHRISTY, TYLER**

Provider ID: 307298

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1689094971

Provider English Spoken: Y  
Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---

### **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

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: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

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**

**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**








**HUERTA, STEVEN**

Provider ID: 307933





Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录




 134 GRAPEVINE RD  
 VISTA, CA 92083  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Male  
 NPI: 1558607440  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP





### CERTIFIED NURSE PRACTITIONER

**HUERTA, STEVEN**  
 Provider ID: 307931  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
 VISTA, CA 92084  
 Phone: (760) 631-5000  
 Fax: (760) 414-3892  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Male  
 NPI: 1558607440  
 Provider English Spoken: Y  
 Cultural Competency: N  
 Medi-Cal Open Panel: Yes

Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Hours: M-F 8AM-5PM  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP

### CERTIFIED NURSE PRACTITIONER








**KELLEHER, BRIDGET**  
 Provider ID: 298083  
 Board Certified Specialty: No  
 IHP OF SOUTHERN CAL-PHP  
 134 GRAPEVINE RD  
 VISTA, CA 92083  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
 631-5000  
 Provider Gender: Female  
 NPI: 1245695006

 Provider English Spoken: Y  
 Provider Language(s)  
 Spoken: Spanish  
 Cultural Competency: N  
 Hospital Affiliation: TRI CITY  
 MEDICAL CTR  
 Medi-Cal Open Panel: Yes  
 Min/Max Age: 0\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT  
 PROVIDER  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP,  
 Rady Childrens Health

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  
 Website: N/A  
 IPA: IHP of Southern Cal-PHP,  
 Rady Childrens Health  
 Network

### CERTIFIED NURSE PRACTITIONER

**KELLEHER, BRIDGET**  
 Provider ID: 298085

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
 至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
 blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1245695006

Provider English Spoken: Y

Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Hospital Affiliation: TRI CITY  
MEDICAL CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### CERTIFIED NURSE PRACTITIONER

**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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录






 Website: N/A  
IPA: IHP of Southern Cal-PHP


---


### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **NICHOLAS, ESTELA**

Provider ID: 239866  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Female  
NPI: 1558384792  
 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M 8AM-5PM  
TU-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

 Website: N/A  
IPA: Community Care IPA LLC

---


### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **PRITZKER, JOELY**



Provider ID: 239773  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3892


 After Hours Phone: (760)  
631-5000

Provider Gender: Female  
NPI: 1619384351

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM  
SA 9AM-4PM

 Website: N/A  
IPA: Community Care IPA LLC


---


### **CERTIFIED NURSE** **PRACTITIONER**

---

#### **SRILASAK, MICHELE**


Provider ID: 281857  
Board Certified Specialty: No  
UCSD MEDICAL GROUP

 910 SYCAMORE AVE STE  
102  
VISTA, CA 92081

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

Provider Gender: Female  
NPI: 1265487326

 Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: UCSD  
MEDICAL CTR, UCSD LA  
JOLLA JOHN SALLY  
THORNTON

Medi-Cal Open Panel: Yes  
Min/Max Age: 0\None

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A  
IPA: UCSD Medical Group

---


### **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




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Min/Max Age: 12\None  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-2PM  
SA 9AM-4PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network





### **CERTIFIED NURSE PRACTITIONER**




**TAYLOR, CHRISTOPHER**  
Provider ID: 295504  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 105 DURIAN ST STE A  
VISTA, CA 92083  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Male  
NPI: 1851747166  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-2PM  
SA 9AM-4PM  
 Website: N/A

IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network

### **CERTIFIED NURSE PRACTITIONER**

**TAYLOR, CHRISTOPHER**  
Provider ID: 295502  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Male  
NPI: 1851747166  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 12\None  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-2PM  
SA 9AM-4PM  
 Website: N/A  
IPA: IHP of Southern Cal-PHP,  
Rady Childrens Health  
Network




### **CERTIFIED NURSE PRACTITIONER**

**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: 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 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

### **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


### **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 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

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## D. 专家名录


 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**

#### **RUBENSIK, 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

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## D. 专家名录

W-F 8AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### INTERNAL MEDICINE

#### DAO, MARC

Provider ID: 297754  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
1000 VALE TERRACE DR  
VISTA, CA 92084  
Phone: (760) 631-5000  
Fax: (760) 414-3763  
After Hours Phone: (760) 631-5000  
Provider Gender: Male  
NPI: 1467542175  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: French,  
Vietnamese  
Cultural Competency: N  
Hospital Affiliation: PIONEERS  
MEMORIAL HOSPITAL,  
PALOMAR MEDICAL CENTER,  
SHARP MEMORIAL HOSPITAL,  
SHARP MARY BIRCH HOSP  
FOR WOMEN AND  
NEWBORNS, EL CENTRO  
REGIONAL MEDICAL CENTER,  
PALOMAR HEALTH  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### INTERNAL MEDICINE

#### **SHABANIAN, LEILA**

Provider ID: 306766

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1013963073

Provider English Spoken: Y

Provider Language(s)  
Spoken: Farsi, French,  
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

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

### UCSD MEDICAL GROUP

910 SYCAMORE AVE STE  
102  
VISTA, CA 92081

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Provider Gender: Female

NPI: 1174758031

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

Website: N/A

IPA: UCSD Medical Group

### **OBSTETRICS / GYNECOLOGY**

#### **FRANCIS, LARRY**

Provider ID: 290292

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1215008552

Provider English Spoken: Y

Provider Language(s)

Spoken: Spanish

Cultural Competency: N

Hospital Affiliation:

SOUTHWEST HEALTHCARE

RANCHO SPRINGS HOSPITAL,

SHARP MEMORIAL HOSPITAL,

POMONA VALLEY HOSP MED

CTR

Medi-Cal Open Panel: Yes

Min/Max Age: 13\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 9AM-8PM  
F 9AM-5PM

SA 9AM-4PM

Website: N/A

IPA: IHP of Southern Cal-PHP

### **OBSTETRICS / GYNECOLOGY**

#### **HAWKINS, MELISSA**

Provider ID: 290596

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

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





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## D. 专家名录

Medi-Cal Open Panel: Yes  
 Min/Max Age: 18\None  
 American Sign Language (ASL):  
 N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-TH 9AM-8PM  
 F 9AM-5PM  
 SA 9AM-4PM  
 Website: N/A  
 IPA: 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  
 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

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: 245239

Board Certified Specialty: No

COMMUNITY CARE IPA LLC

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1164546313


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W 8AM-5PM  
TH 10:30AM-7:30PM

F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

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### OPTOMETRIST


#### KIM, MICHAEL

Provider ID: 290697

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Male

NPI: 1164546313


 Provider English Spoken: Y  
Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-W 8AM-5PM  
TH 10:30AM-7:30PM

F 8AM-5PM

 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

---

### OPTOMETRIST


#### KIM, MICHAEL

Provider ID: 290903

Board Certified Specialty: No

IHP OF SOUTHERN CAL-PHP

 1000 VALE TERRACE DR  
VISTA, CA 92084

 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## D. 专家名录

Min/Max Age: 0\None

American Sign Language (ASL): IHP of Southern Cal-PHP

N

 Accessibility: CONTACT PROVIDER

 Hours: 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: 290238

Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP



 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Website: N/A

IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

---


### OPTOMETRIST

#### MORA, WENDY

Provider ID: 242634

Board Certified Specialty: No  
COMMUNITY CARE IPA LLC



 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

Provider Gender: Female

NPI: 1376958389

 Provider English Spoken: Y  
 Provider Language(s)  
Spoken: Spanish

Cultural Competency: N


Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 9AM-8PM  
F 9AM-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)






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## D. 专家名录

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

### 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  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP



### OPTOMETRIST

#### TRAN, JESSICA

Provider ID: 303733  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
 134 GRAPEVINE RD  
VISTA, CA 92083  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
Provider Gender: Female  
NPI: 1457922957  
 Provider English Spoken: Y  
Cultural Competency: N  
Medi-Cal Open Panel: Yes  
Min/Max Age: 5\21  
American Sign Language (ASL): N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM  
 Website: N/A  
IPA: Community Care IPA LLC,  
IHP of Southern Cal-PHP

### OPTOMETRIST

#### TRAN, JESSICA

Provider ID: 304595  
Board Certified Specialty: No  
COMMUNITY CARE IPA LLC  
 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
Fax: (760) 414-3892

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

☎ After Hours Phone: (760) 631-5000

Provider Gender: Female

NPI: 1457922957

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **TRAN, JESSICA**

Provider ID: 304596

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: 1457922957

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **OPTOMETRIST**

#### **TRAN, JESSICA**

Provider ID: 303729

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: 1457922957

☑ Provider English Spoken: Y

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 5\21

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

SA 9AM-4PM

🌐 Website: N/A

IPA: Community Care IPA LLC,

IHP of Southern Cal-PHP

### **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

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## D. 专家名录

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 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

Provider Gender: Female  
NPI: 1619115664

Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: SCRIPPS  
MEMORIAL HOSPITAL

ENCINITAS, TRI CITY MEDICAL  
CTR, SOUTHWEST

HEALTHCARE INLAND  
VALLEY HOSPITAL

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Website: N/A

IPA: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## D. 专家名录

**PROVIDER**  
Hours: M 7AM-7PM  
TU 7AM-5PM  
W 7AM-7PM  
TH 7AM-5PM  
F 7AM-7PM  
Website: N/A  
IPA: Community Care IPA LLC

### **RHEUMATOLOGY**

**ALNAHLAWI, BASMA**  
Provider ID: 306869  
Board Certified Specialty: No  
IHP OF SOUTHERN CAL-PHP  
2095 W VISTA WAY STE 216  
VISTA, CA 92083  
Phone: (760) 736-8091  
Fax: (760) 736-8092  
After Hours Phone: (760) 736-8091  
Provider Gender: Female  
NPI: 1144455262  
Provider English Spoken: Y  
Provider Language(s)  
Spoken: Arabic  
Cultural Competency: N  
Hospital Affiliation: LOMA  
LINDA UNIVERSITY MED CTR  
MURRIETA, PALOMAR  
MEDICAL CENTER, LOMA  
LINDA UNIVERSITY MED CTR  
Medi-Cal Open Panel: Yes  
Min/Max Age: 18\None  
American Sign Language (ASL):  
N  
Accessibility: CONTACT  
PROVIDER

Hours: M-F 9AM-5PM  
Website: N/A  
IPA: IHP of Southern Cal-PHP

### **SURGERY GENERAL**

**ARMANI, AVA**  
Provider ID: 282144  
Board Certified Specialty: No  
UCSD MEDICAL GROUP  
910 SYCAMORE AVE STE  
102  
VISTA, CA 92081  
Phone: (800) 926-8273  
Fax: (888) 539-8781  
After Hours Phone: (800)  
926-8273  
Provider Gender: Female  
NPI: 1861759383  
Provider English Spoken: Y  
Cultural Competency: N  
Hospital Affiliation: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## D. 专家名录

### 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

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## D. 专家名录

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


#### CRITICAL CARE MEDICINE

**CHEN, KENNETH**

Provider ID: 283131

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595


 Phone: (951) 677-1111


Fax: (951) 677-9757

 After Hours Phone: (951)  
677-1111

Provider Gender: Male

NPI: 1720472657

 Provider English Spoken: Y

 Provider Language(s)  
Spoken: Mandarin

Cultural Competency: N

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


#### CRITICAL CARE MEDICINE

**PATEL, SAGAR**


Provider ID: 283000

Board Certified Specialty: No  
UCSD MEDICAL GROUP

 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595

 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)  
677-1111

Provider Gender: Male

NPI: 1245672302

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD LA  
JOLLA JOHN SALLY

THORNTON, UCSD MEDICAL  
CTR


Medi-Cal Open Panel: Yes

Min/Max Age: 18\None

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

### INTERNAL MEDICINE


#### CRITICAL CARE MEDICINE

**TRAN, LINH**

Provider ID: 202658

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## D. 专家名录

---

NPI: 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

PROVIDER

 Hours: M-F 8AM-5PM

 Website: N/A

IPA: UCSD Medical Group

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### **PULMONARY DISEASES**

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#### **SURI, RAJAT**

Provider ID: 283349

Board Certified Specialty: No

UCSD MEDICAL GROUP

 36485 INLAND VALLEY DR  
WILDOMAR, CA 92595

 Phone: (951) 677-1111

Fax: (951) 677-9757

 After Hours Phone: (951)  
677-1111

Provider Gender: Male

NPI: 1144615337

 Provider English Spoken: Y  
Cultural Competency: N

Hospital Affiliation: UCSD

MEDICAL CTR, UCSD LA

JOLLA JOHN SALLY

THORNTON

Medi-Cal Open Panel: Yes

Min/Max Age: 0\None

American Sign Language (ASL):

N

 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## E. 医院目录 - 综合急症护理医院

### GROSSMONT HOSPITAL

Provider ID: 170046

5555 GROSSMONT  
CENTER DR  
LA MESA, CA 91942

Phone: (619) 740-6000

After Hours Phone: (619)  
740-6000

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

Hours: 24 Hours / 7  
days/week

License Number: 080000006  
NPI: 1528041811

Website: [www.sharp.com/hospitals/grossmont/](http://www.sharp.com/hospitals/grossmont/)

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Birthing Friendly: Y

### KINDRED HOSPITAL SAN DIEGO

Provider ID: 169663

1940 EL CAJON BLVD  
SAN DIEGO, CA 92104

Phone: (619) 543-4500

After Hours Phone: (619)  
543-4500

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

Hours: 24 Hours / 7  
days/week

NPI: 1992880512

Website: N/A

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PALOMAR HEALTH

Provider ID: 170052

15615 POMERADO RD  
POWAY, CA 92064

Phone: (858) 613-4000

After Hours Phone: (858)  
613-4000

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

Hours: 24 Hours / 7  
days/week

License Number: 080000127  
NPI: 1376513754

Website: [www.palomarhealth.org/facilities/palomar-poway-outpatient](http://www.palomarhealth.org/facilities/palomar-poway-outpatient)

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Birthing Friendly: Y

### PALOMAR MEDICAL CENTER

Provider ID: 173011

2185 CITRACADO PKWY  
ESCONDIDO, CA 92029

Phone: (442) 281-5000

After Hours Phone: (442)  
281-5000

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

Hours: 24 Hours / 7  
days/week

License Number: 080000083  
NPI: 1457321317

Website: [www.palomarhealth.org/facilities/palomar-medical-center](http://www.palomarhealth.org/facilities/palomar-medical-center)

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PARADISE VALLEY HOSPITAL

Provider ID: 170057

2400 E 4TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 470-4321

After Hours Phone: (619)  
470-4321

Accepting New Patients: No  
Min/Max Age: 0\None

Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO


Hours: 24 Hours / 7

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。




## E. 医院目录 - 综合急症护理医院

days/week  
NPI: 1356410351  
 Website: [www.paradisevalleyhospital.net](http://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:  
 Hours: 24 Hours / 7  
days/week  
NPI: 1710065933  
 Website: [www.rchsd.org](http://www.rchsd.org)  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER


### SCRIPPS GREEN HOSPITAL

Provider ID: 171084  
 10666 N TORREY PINES RD  
MS 220  
LA JOLLA, CA 92037  
 Phone: (858) 455-9100  
 After Hours Phone: (858)



455-9100  
Accepting New Patients: No  
Min/Max Age: 0\None  
 Site English Spoken: Y  
Cultural Competency: N  
Hospital Accreditation Status:  
JCAHO  
 Hours: 24 Hours / 7  
days/week  
License Number: 080000139  
NPI: 1841233780  
 Website: [www.scripps.org/locations/hospitals\\_\\_scripps-green-hospital](http://www.scripps.org/locations/hospitals__scripps-green-hospital)  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER

### SCRIPPS MEMORIAL HOSPITAL

Provider ID: 170045  
 9888 GENESEE AVE  
LA JOLLA, CA 92037  
 Phone: (800) 727-4777  
 After Hours Phone: (800)  
727-4777  
Accepting New Patients: No  
Min/Max Age: 0\None  
 Site English Spoken: Y  
Cultural Competency: N  
Hospital Accreditation Status:  
 Hours: 24 Hours / 7  
days/week  
License Number: 080000050  
NPI: 1841277704  
 Website: [www.scripps.org/locations/hospitals\\_\\_scripps-green-hospital](http://www.scripps.org/locations/hospitals__scripps-green-hospital)

s- 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-green-hospital-encinitas](http://www.scripps.org/locations/hospitals__scripps-green-hospital-encinitas)  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT PROVIDER  
Birthing Friendly: Y

### SCRIPPS MERCY HOSPITAL

Provider ID: 170048

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。


## E. 医院目录 - 综合急症护理医院


 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](http://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](http://www.scripps.org/locations/hospitals__scripps-mercy-hospital__scripps-mercy-hospital-chula-vista)

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### SELECT SPECIALTY HOSPITAL SAN DIEGO


Provider ID: 170165

 555 WASHINGTON ST  
SAN DIEGO, CA 92103  
 Phone: (619) 260-8300  
 After Hours Phone: (619)  
260-8300

Accepting New Patients: No  
Min/Max Age: 0\None

 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

License Number: 090000404  
NPI: 1639172133



 Website: N/A

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### SHARP CHULA VISTA MED CTR


Provider ID: 170251

 751 MEDICAL CENTER CT  
CHULA VISTA, CA 91911  
 Phone: (619) 502-5800  
 After Hours Phone: (619)  
502-5800


Accepting New Patients: No  
Min/Max Age: 0\None

 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:  
JCAHO

 Hours: 24 Hours / 7  
days/week

License Number: 090000008  
NPI: 1396728630

 Website: [www.sharp.com/hospitals/chula-vista/](http://www.sharp.com/hospitals/chula-vista/)




American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


Birthing Friendly: Y

### SHARP CORONADO HOSP AND HEALTHCARE CTR

Provider ID: 170252

 250 PROSPECT PL  
CORONADO, CA 92118  
 Phone: (619) 522-3600  
 After Hours Phone: (619)  
522-3600

Accepting New Patients: No  
Min/Max Age: 0\None

 Site English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。



## E. 医院目录 - 综合急症护理医院

Hospital Accreditation Status:

JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1154304475

🌐 Website: [www.sharp.com/hospitals/coronado/](http://www.sharp.com/hospitals/coronado/)

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### SHARP MARY BIRCH HOSP FOR WOMEN AND NEWBORNS

Provider ID: 170054

📍 3003 HEALTH CENTER DR SAN DIEGO, CA 92123

☎ Phone: (858) 939-3400

📞 After Hours Phone: (858) 939-3400

Accepting New Patients: No  
Min/Max Age: 0\None

📄 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:

🕒 Hours: 24 Hours / 7 days/week

License Number: 080000039

NPI: 1407839921

🌐 Website: [www.sharp.com](http://www.sharp.com)

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### SHARP MEMORIAL HOSPITAL

Provider ID: 170047

📍 7901 FROST ST  
SAN DIEGO, CA 92123

☎ Phone: (858) 939-3400

📞 After Hours Phone: (858) 939-3400

Accepting New Patients: No  
Min/Max Age: 0\None

📄 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:

🕒 Hours: 24 Hours / 7 days/week

NPI: 1407839921

🌐 Website: [www.sharp.com/hospitals/memorial/](http://www.sharp.com/hospitals/memorial/)

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Birthing Friendly: Y

### TRI CITY MEDICAL CTR

Provider ID: 170049

📍 4002 VISTA WAY  
OCEANSIDE, CA 92056

☎ Phone: (760) 724-8411

📞 After Hours Phone: (760) 724-8411

Accepting New Patients: No  
Min/Max Age: 0\None

📄 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status:

JCAHO

🕒 Hours: 24 Hours / 7 days/week

NPI: 1801861190

🌐 Website: [www.tricitymed.or](http://www.tricitymed.or)

g

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

Accepting New Patients: No  
Min/Max Age: 0\None

📄 Site English Spoken: Y  
Cultural Competency: N

Hospital Accreditation Status: JCAHO

🕒 Hours: 24 Hours / 7 days/week

License Number: 090000013

NPI: 1184722779

🌐 Website: N/A

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### UC SAN DIEGO HEALTH - EAST CAMPUS MEDICAL CENTER

Provider ID: 685221

📍 6655 ALVARADO RD  
SAN DIEGO, CA 92120

Accepting New Patients: No  
Min/Max Age: 0\None

📄 Site English Spoken: Y  
Cultural Competency: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## E. 医院目录 - 综合急症护理医院

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*Hospital Accreditation Status:*

JCAHO

 *Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1184722779*

 *Website: N/A*


*American Sign Language (ASL):*  
N


 *Accessibility: CONTACT PROVIDER*

### **UCSD LA JOLLA JOHN SALLY THORNTON**

*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:*


 *Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1497021265*

 *Website: N/A*


*American Sign Language (ASL):*  
N


 *Accessibility: CONTACT PROVIDER*

### **UCSD MEDICAL CTR**

*Provider ID: 170051*

 200 W ARBOR DR  
SAN DIEGO, CA 92103


 *Phone: (619) 543-6222*

 *After Hours Phone: (619) 543-6222*

*Accepting New Patients: No*  
*Min/Max Age: 0\None*


 *Site English Spoken: Y*  
*Cultural Competency: N*

*Hospital Accreditation Status:*

 *Hours: 24 Hours / 7 days/week*

*License Number: 090000101*

*NPI: 1184722779*

 *Website: <https://health.ucsd.edu/locations/pages/hillcrest.aspx>*

*American Sign Language (ASL):*  
N

 *Accessibility: CONTACT PROVIDER*

*Birthing Friendly: Y*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

### CARLSBAD

#### LA COSTA HOUSE

Provider ID: 662923

6433 FLAMENCO ST  
CARLSBAD, CA 92009

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

Accepting New Patients: No  
NPI: 1962488007

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CHULA VISTA

#### BIRCH PATRICK CONV CTR

Provider ID: 171998

751 MEDICAL CENTER CT  
CHULA VISTA, CA 91911

Phone: (619) 502-3600

Fax: (619) 502-5835

After Hours Phone: (619)  
502-3600

Accepting New Patients: No  
NPI: 1538142369

Website: [www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm](http://www.sharp.com/hospitals/chula-vista/departments/skilled-nursing.cfm)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### SOUTH BAY POST ACUTE CARE

Provider ID: 394308

553 F ST  
CHULA VISTA, CA 91910

Phone: (619) 426-8611

Fax: (619) 240-7378

After Hours Phone: (619)  
426-8611

Accepting New Patients: No  
Hours: M-F 9AM-5:30PM  
NPI: 1376946277

Website: <http://southbaypostacute.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Site Languages(s) Spoken:  
Spanish, Filipino, Pilipino  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### CORONADO

#### VILLA CORONADO CONVALESCENT

Provider ID: 172644

233 PROSPECT PL

CORONADO, CA 92118

Phone: (619) 552-3900

Fax: (619) 522-3939

After Hours Phone: (619)  
552-3900

Accepting New Patients: No  
NPI: 1184607418

Website: [www.sharp.com/hospitals/coronado/departments/long-term-care.cfm](http://www.sharp.com/hospitals/coronado/departments/long-term-care.cfm)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### EL CAJON

#### AVOCADO POST ACUTE

Provider ID: 171985

510 E WASHINGTON AVE  
EL CAJON, CA 92020

Phone: (619) 440-1211

Fax: (619) 956-3929

After Hours Phone: (619)  
440-1211

Accepting New Patients: No  
NPI: 1568484517


Website: [www.avacadopostacute.com](http://www.avacadopostacute.com)

Credentials and/or  
certifications:






Site English Spoken: Y  
Cultural Competency: N

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## F. 专业护理机构


American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### COTTONWOOD CANYON HEALTHCARE CENTER






Provider ID: 171983  
 1391 E MADISON AVE  
EL CAJON, CA 92021  
 Phone: (619) 444-1107  
Fax: (619) 444-1403  
 After Hours Phone: (619)  
444-1107  
Accepting New Patients: No  
NPI: 1013953199  
 Website: <http://cottonwoodcanyonhc.com>  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### COUNTRY HILLS HEALTH CARE CENTER

Provider ID: 416853  
 1580 BROADWAY  
EL CAJON, CA 92021  
 Phone: (619) 441-8745  
 After Hours Phone: (619)  
441-8745  
Accepting New Patients: No  
NPI: 1700973963  
 Website: [www.countryhills.c](http://www.countryhills.c)






om  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
American Sign Language,  
Arabic, Korean, Spanish,  
Tagalog, Farsi, Vietnamese,  
Mandarin  
Cultural Competency: N  
American Sign Language (ASL):  
Y  
 Accessibility: CONTACT  
PROVIDER

### COUNTRY HILLS POST ACUTE






Provider ID: 503510  
 1580 BROADWAY  
EL CAJON, CA 92021  
 Phone: (619) 441-8745  
Fax: (619) 441-9029  
 After Hours Phone: (619)  
441-8745  
Accepting New Patients: No  
NPI: 1063974285  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### GRANITE HILLS HEALTHCARE AND WELLNESS CENTRE LLC

Provider ID: 286282

 1340 E MADISON AVE  
EL CAJON, CA 92021  
 Phone: (619) 447-1020  
Fax: (619) 447-1024  
 After Hours Phone: (619)  
447-1020  
Accepting New Patients: No  
NPI: 1346516937  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

### MAGNOLIA POST ACUTE CARE

Provider ID: 380518  
 635 S MAGNOLIA AVE  
EL CAJON, CA 92020  
 Phone: (616) 442-8826  
Fax: (619) 442-0288  
 After Hours Phone: (616)  
442-8826  
Accepting New Patients: No  
NPI: 1316340227  
 Website: N/A  
Credentials and/or  
certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish, Tagalog  
Cultural Competency: N  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## F. 专业护理机构

### PROVIDER

#### PARKSIDE HEALTH AND WELLNESS CENTER

Provider ID: 349923

444 W LEXINGTON AVE  
EL CAJON, CA 92020

Phone: (619) 442-7744

After Hours Phone: (619)  
442-7744

Accepting New Patients: No

NPI: 1447653340

Website: <http://parksidehealth.net>

Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### SAN DIEGO POST ACUTE CENTER

Provider ID: 173508

1201 S ORANGE AVE  
EL CAJON, CA 92020

Phone: (619) 441-1988

Fax: (619) 441-7416

After Hours Phone: (619)  
441-1988

Accepting New Patients: No

NPI: 1285061085

Website: <http://sdpostacute.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### SOMERSET SUBACUTE AND CARE

Provider ID: 348526

151 CLAYDELLE AVE  
EL CAJON, CA 92020

Phone: (619) 442-0245

Fax: (614) 423-3631

After Hours Phone: (619)  
442-0245

Accepting New Patients: No

NPI: 1073916987

Website: <http://somensetsubacute.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](http://www.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: <http://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

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## F. 专业护理机构

EL CAJON, CA 92020  
☎ Phone: (619) 442-0544  
📞 After Hours Phone: (619) 442-0544

Accepting New Patients: No  
NPI: 1023048295

🌐 Website: <http://villalaspalmascares.com>  
Credentials and/or certifications:

☐ Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### ENCINITAS

#### AVIARA HEALTHCARE CENTER

Provider ID: 171995

📍 944 REGAL RD  
ENCINITAS, CA 92024  
☎ Phone: (760) 944-0331  
📞 After Hours Phone: (760) 944-0331

Accepting New Patients: No  
NPI: 1518146620

🌐 Website: <http://aviarahealthcare.com>  
Credentials and/or certifications:

☐ Site English Spoken: Y  
☐ Site Languages(s) Spoken: Tagalog, Spanish  
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

#### ENCINITAS NURSING AND REHAB CTR

Provider ID: 171977

📍 900 SANTA FE DR  
ENCINITAS, CA 92024  
☎ Phone: (760) 753-6423  
📞 Fax: (760) 753-4979

📞 After Hours Phone: (760) 753-6423

Accepting New Patients: No  
🕒 Hours: M-F 8AM-5PM  
NPI: 1265415749

🌐 Website: [www.covenantcare.com](http://www.covenantcare.com)

Credentials and/or certifications:

☐ Site English Spoken: Y  
☐ Site Languages(s) Spoken: Spanish  
Cultural Competency: N

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

#### THE DORTHY AND JOSEPH GOLDBERG HEALTHCARE CENTER

Provider ID: 172000

📍 211 SAXONY RD  
ENCINITAS, CA 92024  
☎ Phone: (760) 632-0081  
📞 Fax: (760) 516-2016

📞 After Hours Phone: (760) 632-0081

Accepting New Patients: No  
🕒 Hours: M-F 7AM-4PM  
NPI: 1659482032

🌐 Website: N/A  
Credentials and/or certifications:

☐ Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

### 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

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## F. 专业护理机构

### LIFE CARE CENTER OF ESCONDIDO

Provider ID: 172010

1980 FELICITA RD  
ESCONDIDO, CA 92025

Phone: (760) 741-6109

After Hours Phone: (760)  
741-6109

Accepting New Patients: No

NPI: 1386681286

Website: <http://lifecarecenterofescondido.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PALOMAR HEIGHTS CARE CTR

Provider ID: 170055

1260 E OHIO AVE  
ESCONDIDO, CA 92027

Phone: (760) 746-1100

After Hours Phone: (760)  
746-1100

Accepting New Patients: No

NPI: 1255337440

Website: <http://palomarheightsrehab.com>

Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### PALOMAR VISTA HEALTHCARE CTR

Provider ID: 171988

201 N FIG ST  
ESCONDIDO, CA 92025

Phone: (760) 746-0303

Fax: (760) 738-1749

After Hours Phone: (760)  
746-0303

Accepting New Patients: No  
NPI: 1861491490

Website: <http://palomarvista.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### VALLE VISTA POST ACUTE

Provider ID: 171968

1025 W 2ND AVE  
ESCONDIDO, CA 92025

Phone: (760) 745-1842

Fax: (760) 745-4346

After Hours Phone: (760)  
745-1842

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1659369262

Website: [www.covenantcare.com](http://www.covenantcare.com)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### FALLBROOK

#### FALLBROOK SKILLED NURSING

Provider ID: 298744

325 POTTER ST  
FALLBROOK, CA 92028

Phone: (760) 728-2330

Fax: (909) 863-4644

After Hours Phone: (760)  
728-2330

Accepting New Patients: No

Hours: M-F 8AM-5PM  
NPI: 1265823264

Website: [www.progressivecarecenters.com](http://www.progressivecarecenters.com)

Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

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## F. 专业护理机构

### VIA RIO HOUSE

Provider ID: 662930

1262 VIA ENCINOS DR  
FALLBROOK, CA 92028

Phone: (760) 547-1976

Fax: (760) 721-9872

After Hours Phone: (760)  
547-1976

Accepting New Patients: No

NPI: 1962488007

Website: N/A

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### LA JOLLA

#### LA JOLLA NURSING AND REHAB CTR

Provider ID: 171975

2552 TORREY PINES RD  
LA JOLLA, CA 92037

Phone: (858) 453-5810

Fax: (858) 214-1212

After Hours Phone: (858)  
453-5810

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1457486078

Website: [www.covenantcare.com](http://www.covenantcare.com)

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken: ,  
Spanish

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### THE COVE AT LA JOLLA

Provider ID: 305514

7160 FAY AVE  
LA JOLLA, CA 92037

Phone: (858) 459-4361

After Hours Phone: (858)  
459-4361

Accepting New Patients: No

Hours: M-F 7:30AM-4PM

NPI: 1588067482

Website: <http://thecoveatljolla.com>

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### LA MESA

#### ARBOR HILLS NURSING CENTER

Provider ID: 172007

7800 PARKWAY DR  
LA MESA, CA 91942

Phone: (619) 460-2330

After Hours Phone: (619)  
460-2330

Accepting New Patients: No

NPI: 1356345706

Website: [www.lifegen.net/arborhills/](http://www.lifegen.net/arborhills/)

Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish, Russian

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

### CARE MERIDIAN LA MESA

Provider ID: 173379

5640 AZTEC DR  
LA MESA, CA 91942

Phone: (949) 263-6632

Fax: (619) 465-0019

After Hours Phone: (949)  
263-6632

Accepting New Patients: No

NPI: 1235404674

Website: [www.neurorestorative.com](http://www.neurorestorative.com)

Credentials and/or

certifications:

Site English Spoken: Y

Cultural Competency: N

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

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## F. 专业护理机构

### **COUNTRY MANOR LA MESA HEALTHCARE CENTER**

Provider ID: 172023

5696 LAKE MURRAY BLVD  
LA MESA, CA 91942

Phone: (619) 460-7871

After Hours Phone: (619)  
460-7871

Accepting New Patients: No  
NPI: 1457345001

Website: [countrymanorlamesa.com](http://countrymanorlamesa.com)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **GROSSMONT HOSPITAL DP SNF**

Provider ID: 172643

5555 GROSSMONT  
CENTER DR  
LA MESA, CA 91942

Phone: (619) 740-4110

After Hours Phone: (619)  
740-4110

Accepting New Patients: No  
NPI: 1417930249

Website: [www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm](http://www.sharp.com/hospitals/grossmont/departments/skilled-nursing.cfm)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **GROSSMONT POST ACUTE CARE**

Provider ID: 310488

8787 CENTER DR  
LA MESA, CA 91942

Phone: (619) 460-4444

Fax: (619) 713-5116

After Hours Phone: (619)  
460-4444

Accepting New Patients: No  
NPI: 1689077588

Website: <http://grossmontpostacute.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **HILLDALE HABILITATION CENTER**

Provider ID: 527671

7979 LA MESA BLVD  
LA MESA, CA 91942

Phone: (619) 465-8010

Fax: (619) 465-8348

After Hours Phone: (619)  
465-8010

Accepting New Patients: No

Hours: M-F 8AM-5PM

NPI: 1073736427

Website: N/A

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **LA MESA HEALTHCARE CTR**

Provider ID: 172022

3780 MASSACHUSETTS  
AVE  
LA MESA, CA 91941

Phone: (619) 465-1313

Fax: (619) 465-8429

After Hours Phone: (619)  
465-1313

Accepting New Patients: No  
NPI: 1003852666

Website: <http://lamesahealthcare.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### **PARKWAY HILLS NURSING & REHAB**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

Provider ID: 417047

7760 PARKWAY DR  
LA MESA, CA 91942

Phone: (619) 469-0124

Fax: (619) 828-7654

After Hours Phone: (619)  
469-0124

Accepting New Patients: No

Hours: M-TH 9AM-5PM  
F 5AM-5PM

NPI: 1174926448

Website: N/A  
Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Farsi, Spanish, Tagalog

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### LEMON GROVE

#### BELLA VISTA HEALTH CENTER

Provider ID: 419062

7922 PALM ST  
LEMON GROVE, CA 91945

Phone: (619) 644-1000

Fax: (619) 797-2920

After Hours Phone: (619)  
644-1000

Accepting New Patients: No

NPI: 1760709687

Website: [www.bellavistahealth.com](http://www.bellavistahealth.com)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### LEMON GROVE CARE AND REHAB CTR

Provider ID: 172013

8351 BROADWAY  
LEMON GROVE, CA 91945

Phone: (619) 463-0294

Fax: (619) 461-1064

After Hours Phone: (619)  
463-0294

Accepting New Patients: No

NPI: 1336134204

Website: <http://lemongrovecare.com>

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### NATIONAL CITY

#### CASTLE MANOR NURSING AND REHABILITATION CTR

Provider ID: 171978

541 S V AVE  
NATIONAL CITY, CA 91950

Phone: (619) 791-7900

After Hours Phone: (619)

791-7900

Accepting New Patients: No

NPI: 1497759856

Website: [www.lifegen.net/castlemanor/index.html](http://www.lifegen.net/castlemanor/index.html)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### FRIENDSHIP MANOR NURSING AND REHABILITATION CTR

Provider ID: 171973

902 EUCLID AVE  
NATIONAL CITY, CA 91950

Phone: (619) 791-7700

Fax: (619) 791-7791

After Hours Phone: (619)  
791-7700

Accepting New Patients: No

Hours: M-F 9AM-5PM

NPI: 1235133687

Website: [www.lifegen.net/friendshipmanor/](http://www.lifegen.net/friendshipmanor/)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

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## F. 专业护理机构

### PARADISE VALLEY HEALTH CARE CENTER

Provider ID: 171106

2575 E 8TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 470-6700

After Hours Phone: (619)  
470-6700

Accepting New Patients: No  
NPI: 1275513293

Website: <http://pvhcc.com>  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### WINDSOR GARDENS CONV CTR OF SAN DIEGO

Provider ID: 172011

220 E 24TH ST  
NATIONAL CITY, CA 91950

Phone: (619) 474-6741

Fax: (619) 474-1925

After Hours Phone: (619)  
474-6741

Accepting New Patients: No  
NPI: 1730176538

Website: [www.windsorcare.com](http://www.windsorcare.com)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL): Accepting New Patients: No  
N

Accessibility: CONTACT  
PROVIDER

### OCEANSIDE

#### LA PALOMA HEALTHCARE CTR

Provider ID: 172021

3232 THUNDER DR  
OCEANSIDE, CA 92056

Phone: (760) 724-2193

After Hours Phone: (760)  
724-2193

Accepting New Patients: No  
NPI: 1265462436

Website: [WWW.LAPALOMAHEALTHCARE.COM](http://WWW.LAPALOMAHEALTHCARE.COM)

Credentials and/or  
certifications:

Site English Spoken: Y

Site Language(s) Spoken:  
Spanish, Armenian, Korean,  
Tagalog

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### MCNEALY HOUSE

Provider ID: 662925

4602 ALLENDE AVE  
OCEANSIDE, CA 92057

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

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


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## F. 专业护理机构

 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://bouldercrekpa.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](http://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


 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。






## F. 专业护理机构

 3520 4TH AVE  
 SAN DIEGO, CA 92103  
 Phone: (619) 291-5270  
 After Hours Phone: (619) 291-5270  
 Accepting New Patients: No  
 NPI: 1578521274  
 Website: <http://balboahc.com>  
 Credentials and/or certifications:  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Mandarin, Spanish, Tagalog, Vietnamese  
 Cultural Competency: N  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

**BRIGHTON PLACE SAN DIEGO**  
 Provider ID: 402624  
 1350 EUCLID AVE  
 SAN DIEGO, CA 92105  
 Phone: (619) 263-2166  
 After Hours Phone: (619) 263-2166  
 Accepting New Patients: No  
 NPI: 1346258274  
 Website: N/A  
 Credentials and/or certifications:  
 Site English Spoken: Y  
 Cultural Competency: N  
 American Sign Language (ASL): N  
 Accessibility: CONTACT




### PROVIDER

#### CARMEL MOUNTAIN REHAB AND HEALTHCARE CTR


Provider ID: 171971  
 11895 AVENUE OF INDUSTRY  
 SAN DIEGO, CA 92128  
 Phone: (858) 673-0101  
 Fax: (858) 673-8320  
 After Hours Phone: (858) 673-0101  
 Accepting New Patients: No  
 NPI: 1083727093  
 Website: <http://carmelmountain.net>  
 Credentials and/or certifications:


Site English Spoken: Y  
 Site Languages(s) Spoken: Tagalog, Armenian, Mandarin, Spanish, Russian, Korean, Vietnamese  
 Cultural Competency: N  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

#### GOLDEN HILL POST ACUTE






Provider ID: 614821  
 1201 34TH ST  
 SAN DIEGO, CA 92102  
 Phone: (619) 232-2946  
 Fax: (619) 702-7358  
 After Hours Phone: (619) 232-2946


Accepting New Patients: No  
 NPI: 1598229437

 Website: N/A  
 Credentials and/or certifications:

Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Tagalog  
 Cultural Competency: N  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

#### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

### LLC

Provider ID: 172617

4075 54TH ST  
SAN DIEGO, CA 92105

Phone: (619) 582-5168

Fax: (619) 325-0194

After Hours Phone: (619)  
582-5168

Accepting New Patients: No

NPI: 1881684900

Website: [www.jacobhealthcare.com](http://www.jacobhealthcare.com)

Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### MISSION HILLS POST ACUTE CARE

Provider ID: 339053

3680 REYNARD WAY  
SAN DIEGO, CA 92103

Phone: (619) 297-4484

Fax: (855) 214-6992

After Hours Phone: (619)  
297-4484

Accepting New Patients: No  
NPI: 1669875563

Website: [http://missionhills  
postacute.com](http://missionhills<br/>postacute.com)

Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### RADY CHILDRENS

### CONVALESCENT HOSPITAL

Provider ID: 172200

8022 BIRMINGHAM DR  
SAN DIEGO, CA 92123

Phone: (858) 966-5833

Fax: (858) 966-8558

After Hours Phone: (858)  
966-5833

Accepting New Patients: No  
NPI: 1992881478

Website: [www.rchsd.org](http://www.rchsd.org)  
Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### REO VISTA HEALTHCARE CTR

Provider ID: 171993

6061 BANBURY ST  
SAN DIEGO, CA 92139

Phone: (619) 475-2211

Fax: (619) 479-9126

After Hours Phone: (619)  
475-2211

Accepting New Patients: No  
NPI: 1255499174

Website: <http://reovista.com>

Credentials and/or  
certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/med-cal](http://blueshieldca.com/promise/med-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

Provider ID: 262151

 3202 DUKE ST  
SAN DIEGO, CA 92110  
 Phone: (619) 224-4141  
 After Hours Phone: (619)  
224-4141

Accepting New Patients: No  
NPI: 1538174990

 Website: N/A  
Credentials and/or



certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### THE SPRINGS AT PACIFIC REGENT

Provider ID: 172008

 3884 NOBEL DR  
SAN DIEGO, CA 92122  
 Phone: (858) 625-8700  
Fax: (858) 625-8777

 After Hours Phone: (858)  
625-8700

Accepting New Patients: No  
NPI: 1003198342

 Website: N/A  
Credentials and/or

certifications:



Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N


 Accessibility: CONTACT

PROVIDER

### UNIVERSITY CARE CENTER

Provider ID: 172024

 5602 UNIVERSITY AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 583-1993  
Fax: (619) 501-3559

 After Hours Phone: (619)  
583-1993

Accepting New Patients: No  
NPI: 1871522672

 Website: <http://universitycarecenter.com>

Credentials and/or  
certifications:



Site English Spoken: Y  
 Site Languages(s) Spoken:  
Tagalog, Mandarin,  
Russian, Vietnamese, Farsi,  
Spanish

Cultural Competency: N  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### VILLA RANCHO BERNARDO CARE CENTER

Provider ID: 172009

 15720 BERNARDO CENTER  
DR  
SAN DIEGO, CA 92127  
 Phone: (858) 672-3900  
Fax: (858) 672-9247

 After Hours Phone: (858)  
672-3900

Accepting New Patients: No

NPI: 1518063437

 Website: [www.villaranchobernardo.com](http://www.villaranchobernardo.com)



Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

### WINDSOR GARDENS CONV AND REHAB OF GOLDEN HILL

Provider ID: 172012

 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

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## F. 专业护理机构

### 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/Sstanfordcourt/](http://www.lifegen.net/Sstanfordcourt/)  
Credentials and/or

certifications:

Site English Spoken: Y

Site Languages(s) Spoken:  
Tagalog, Spanish

Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

### SPRING VALLEY

#### AMAYA SPRINGS HEALTH CARE CENTER

Provider ID: 420233

8625 LAMAR ST  
SPRING VALLEY, CA 91977

Phone: (323) 326-6186

Fax: (619) 461-3575

After Hours Phone: (323)  
326-6186

Accepting New Patients: No  
NPI: 1518974542

Website: N/A  
Credentials and/or

certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

#### BRIGHTON PLACE SPRING VALLEY

Provider ID: 417094

9009 CAMPO RD  
SPRING VALLEY, CA 91977

Phone: (619) 460-2711

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](http://covlivingmountmiguel.org)

Credentials and/or  
certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## F. 专业护理机构

### **MOUNT MIGUEL COVENANT VILLAGE HEALTH FAC**

Provider ID: 171969

325 KEMPTON ST  
SPRING VALLEY, CA 91977

Phone: (619) 931-1151

Fax: (224) 233-1397

After Hours Phone: (619)  
931-1151

Accepting New Patients: No

Hours: SU-SA 8AM-5PM  
NPI: 1649375403

Website: [www.mountmiguelcovenantvillage.org](http://www.mountmiguelcovenantvillage.org)  
Credentials and/or certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### **VALLEY CENTER**

#### **AMREEN HOME**

Provider ID: 658588

13873 OAKWOOD GLEN PL  
VALLEY CENTER, CA 92082

Phone: (760) 751-9879

Fax: (760) 749-3019

After Hours Phone: (760)  
751-9879

Accepting New Patients: No  
NPI: 1700160405

Website: N/A  
Credentials and/or certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

### **VISTA**

#### **ANZA HOUSE**

Provider ID: 662920

1736 ANZA AVE  
VISTA, CA 92084

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

Accepting New Patients: No  
NPI: 1962488007

Website: N/A  
Credentials and/or certifications:

Site English Spoken: Y  
Cultural Competency: N

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

#### **GRACE HOUSE**

Provider ID: 662919

2507 HIBISCUS AVE  
VISTA, CA 92081

Phone: (760) 721-1706

Fax: (760) 721-9872

After Hours Phone: (760)  
721-1706

Accepting New Patients: No

NPI: 1962488007

Website: N/A  
Credentials and/or certifications:

Site English Spoken: Y  
Cultural Competency: N  
American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

#### **LA FUENTE POST ACUTE**

Provider ID: 429590

247 E BOBIER DR  
VISTA, CA 92084

Phone: (760) 945-3033

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)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## F. 专业护理机构

724-8222

Accepting New Patients: No

 Hours: SU-SA 9AM-5PM

NPI: 1811942063

 Website: [www.lcca.com](http://www.lcca.com)

Credentials and/or


certifications:

Site English Spoken: Y

Site Language(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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## F. 专业护理机构

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*American Sign Language (ASL): NPI: 1962488007*


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*

 *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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## G. 社区成年人服务 (CBAS) - 成人日间服务

### CHULA VISTA

#### OPEN ARMS ADHC

Provider ID: 417307

301 E J ST  
CHULA VISTA, CA 91910

Phone: (619) 420-1404

Fax: (619) 420-1408

After Hours Phone: (619)  
420-1404

Accepting New Patients: No

Hours: M-F 7AM-3PM

License Number: 060002076

NPI: 1598882169

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:  
N

Facility has access to skilled  
medical interpreters on site?: N  
Interpreter Non-English  
Languages: N

Website: <http://openarmsadhc.com>

### EL CAJON

#### EL CAJON ADHC

Provider ID: 637126

854 JACKMAN ST  
EL CAJON, CA 92020

Phone: (619) 328-2112

Fax: (619) 328-0069

After Hours Phone: (619)  
328-2112

Accepting New Patients: No

Hours: SU-SA 9AM-3PM

License Number: 550008511

NPI: 1184207631

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:  
N

Facility has access to skilled  
medical interpreters on site?: N

Interpreter Non-English  
Languages: N

Website: N/A

#### MAGNOLIA ADULT DAY HEALTH CARE

Provider ID: 408541

490 N MAGNOLIA AVE  
EL CAJON, CA 92020

Phone: (619) 444-1522

Fax: (619) 444-1516

After Hours Phone: (619)  
444-1522

Accepting New Patients: No

Hours: M-F 8AM-4PM

License Number: 60000821

NPI: 1487864468

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL): Facility has access to skilled

N

Language line interpreter  
services: N

If Facility has completed  
cultural competence training:  
N

N

Facility has access to skilled  
medical interpreters on site?: N

Interpreter Non-English  
Languages: N

Website: <http://magnoliaadhc.com>

Website: <http://magnoliaadhc.com>

#### WESTERN ADHC

Provider ID: 417305

240 S MAGNOLIA AVE  
EL CAJON, CA 92020

Phone: (619) 631-7222

Fax: (619) 631-9228

After Hours Phone: (619)  
631-7222

Accepting New Patients: No

Site Languages(s) Spoken: ,  
Spanish, Arabic, Tagalog,  
Farsi

Hours: M-F 7AM-3:30PM  
NPI: 1821125550

Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
services: Y

If Facility has completed  
cultural competence training:  
N


N

Facility has access to skilled

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。








## G. 社区成年人服务 (CBAS) - 成人日间服务

medical interpreters on site?: N  
Interpreter Non-English  
Languages: Y  
 Website: <https://westernadhc.wordpress.com/>


### LA MESA



#### GOLDEN LIFE ADHC



Provider ID: 619502  
 9158 FLETCHER PKWY  
LA MESA, CA 91942  
 Phone: (619) 357-7753  
Fax: (619) 439-6038  
 After Hours Phone: (619) 357-7753  
Accepting New Patients: No  
NPI: 1093921900  
 Accessibility: CONTACT PROVIDER  
American Sign Language (ASL): N  
Language line interpreter services: N  
If Facility has completed cultural competence training: N  
Facility has access to skilled medical interpreters on site?: N  
Interpreter Non-English  
Languages: N  
 Website: N/A

### NATIONAL CITY

#### HORIZON CBAS

Provider ID: 642082  
 1035 HARBISON AVE


NATIONAL CITY, CA 91950  
 Phone: (619) 474-1822  
 After Hours Phone: (619) 474-1822  
Accepting New Patients: No  
License Number: 060000582  
NPI: 1396476388

 Accessibility: CONTACT PROVIDER  
American Sign Language (ASL): N  
Language line interpreter services: N  
If Facility has completed cultural competence training: N  
Facility has access to skilled medical interpreters on site?: N  
Interpreter Non-English  
Languages: N  
 Website: N/A

### POWAY





#### POWAY ADULT DAY HEALTH CARE CENTER

Provider ID: 404183  
 12250 CROSTHWAITE CIR  
POWAY, CA 92064  
 Phone: (858) 748-5044  
Fax: (858) 748-5405  
 After Hours Phone: (858) 748-5044  
Accepting New Patients: No  
License Number: 60000822  
NPI: 1568659977  
 Accessibility: CONTACT PROVIDER

American Sign Language (ASL): N  
Language line interpreter services: N  
If Facility has completed cultural competence training: N  
Facility has access to skilled medical interpreters on site?: N  
Interpreter Non-English  
Languages: N  
 Website: N/A

### SAN DIEGO

#### CASA PACIFICA ADHCC

Provider ID: 417303  
 1424 30TH ST STE C  
SAN DIEGO, CA 92154  
 Phone: (619) 424-8181  
 After Hours Phone: (619) 424-8181  
Accepting New Patients: No  
NPI: 1609920305  
 Accessibility: CONTACT PROVIDER  
American Sign Language (ASL): N  
Language line interpreter services: N  
If Facility has completed cultural competence training: N  
Facility has access to skilled medical interpreters on site?: N  
Interpreter Non-English  
Languages: N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## G. 社区成年人服务 (CBAS) - 成人日间服务


 Website: [www.casa-pacific.com](http://www.casa-pacific.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.lovingcareadhca.com](http://www.lovingcareadhca.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 Language(s) Spoken:  
Vietnamese, Mandarin,  
Spanish

 Hours: M-F 8AM-5PM

License Number: 550005837

NPI: 1396201828

 Accessibility: CONTACT  
PROVIDER

American Sign Language (ASL):  
N

Language line interpreter  
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](http://Sandiegofamilycircle.com)

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:

Facility has access to skilled  
medical interpreters on site?: N

Interpreter Non-English

Languages: N

 Website: [www.americareadhc.com](http://www.americareadhc.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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medical](http://blueshieldca.com/promise/medical)。此医疗服务提供者目录中的信息可能会发生变化。

## H. 县家庭支持服务 (IHSS)


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### SAN DIEGO

#### AGING & INDEPENDENCE SERVICES

*Specialty: Case Management*

 5560 OVERLAND AVE  
SAN DIEGO, CA 92123

 Phone: (858) 495-5885


*License Number: 1710308986*

*Accessibility: CONTACT*

#### PROVIDER

 Hours: M-F

*8:00AM-5:00PM*

 Website: [https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome\\_supportive\\_services.html](https://www.sandiegocounty.gov/content/sdc/hhsa/programs/ais/inhome_supportive_services.html)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](https://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

## ALPINE

### KHALEEL, AMMAR

Provider Gender: Male

License Number: LCS110302


NPI: 1841744208


Provider English Spoken: Y

Arabic


Cultural Competency: N

AMMAR KHALEEL

 1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### TORRES, RANDALL

Provider Gender: Male

License Number: PSY31823


NPI: 1871696435


Provider English Spoken: Y


Cultural Competency: N

RANDALL P TORRES

 1620 ALPINE BLVD STE 110  
ALPINE, CA 91901

 Phone: (619) 662-4100

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 12\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

## CAMPO

### CASTLEBERRY, DANI

Provider Gender: Female

License Number: LCS95022

NPI: 1053706853

Provider English Spoken: Y


Spanish

Cultural Competency: N

DANI E CASTLEBERRY


 1388 BUCKMAN SPRINGS  
RD

CAMPO, CA 91906

 Phone: (619) 662-4100

Fax: (619) 478-9164

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




# I. 精神健康名录

 Hours: M-F 8AM-8PM  
SA 8AM-4PM

## CASTLEBERRY, DANI

Provider Gender: Female  
License Number: LCS95022  
NPI: 1053706853


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

DANI E CASTLEBERRY

 780 BAY BLVD STE 200  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100


Fax: (619) 240-7825

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


 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

 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

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

 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 Language(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-8PM  
SA 8AM-4PM

## **MALAK, LAWRENCE**

Provider Gender: Male


License Number: A115345

NPI: 1467773028

 Provider English Spoken: Y  
Cultural Competency: N


LAWRENCE T MALAK

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 425-1184

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **MARTINEZ, STEPHANIE**

Provider Gender: Female

License Number: A152787

NPI: 1699126367


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

 678 3RD AVE  
CHULA VISTA, CA 91910

 Phone: (619) 662-4100

Fax: (619) 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

## SHIELDS, SEBASTIAN

Provider Gender: Male

License Number: MFC124495

NPI: 1558895342

Provider English Spoken: Y  
 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

### ARNOLD, REBECCA

Provider Gender: Female

License Number: MFC95778

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

NPI: 1225580350

 Provider English Spoken: Y  
Cultural Competency: N


REBECCA L ARNOLD

 855 E MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 270-3600


Fax: (360) 462-2746

 After Hours Phone: (619)  
270-3600

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


 Site Languages(s) Spoken:  
Japanese, Spanish, Italian,  
Chinese, Farsi, Arabic,  
Mandarin

TDD: U

Min/Max Age: 4\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## ARNOLD, REBECCA

Provider Gender: Female


License Number: MFC95778

NPI: 1225580350

 Provider English Spoken: Y  
Cultural Competency: N


REBECCA L ARNOLD

 855 E MADISON AVE  
EL CAJON, CA 92020

 Phone: (619) 270-3600


Fax: (360) 462-2746

 After Hours Phone: (619)  
270-3600

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Japanese, Spanish, Italian,  
Chinese, Farsi, Arabic,  
Mandarin


TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER



 Hours: M-F 8AM-5PM

## CASEY, SHANNON

Provider Gender: Female

License Number: PSY31889


NPI: 1548873755

 Provider English Spoken: Y  
 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  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
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# I. 精神健康名录

License Number: LCS101900

NPI: 1649727942

Provider English Spoken: Y


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

## GUARDADO-SOTO, RAQUEL

Provider Gender: Female

License Number: PSY26883

NPI: 1194999276


Provider English Spoken: Y

Cultural Competency: N

RAQUEL GUARDADO-SOTO

 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: 13\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## MANUEL, FRANCESCA

Provider Gender: Female

License Number: LCS107210

NPI: 1275097081


Provider English Spoken: Y

Cultural Competency: N

FRANCESCA A MANUEL

 215 W MADISON AVE

EL CAJON, CA 92020

 Phone: (619) 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

## POSTLETHWAITE,

### ALEJANDRA

Provider Gender: Female

License Number: A88938

NPI: 1750566915

Provider English Spoken: Y






Spanish

Cultural Competency: N



ALEJANDRA POSTLETHWAITE


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# I. 精神健康名录

 855 E MADISON AVE  
EL CAJON, CA 92020  
 Phone: (619) 440-2751  
Fax: (858) 633-4692  
 After Hours Phone: (619)  
440-2751  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## SADDA, REEM

Provider Gender: Female  
License Number: A163129  
NPI: 1871921833  
 Provider English Spoken: Y  
 Arabic  
Cultural Competency: N  
REEM J SADDA

 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
 After Hours Phone: (619)  
662-4100  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 18\None  
Gender Restriction: No Gender



restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

## WEAVER, AMANDA

Provider Gender: Female  
License Number: MFC105361  
NPI: 1174266423

 Provider English Spoken: Y  
Cultural Competency: N

AMANDA R WEAVER


 875 EL CAJON BLVD  
EL CAJON, CA 92020  
 Phone: (619) 662-4100  
Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 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



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# I. 精神健康名录

 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  
 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  
 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

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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# I. 精神健康名录

Site English Spoken: Y  
TDD: U  
Min/Max Age: 18\None  
Gender Restriction: No Gender restriction




American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M 7AM-7:30PM  
TU 7AM-4:30PM  
W 7AM-7:30PM  
TH-F 7AM-4:30PM

## **BELINSKY, MARIA**

Provider Gender: Female  
License Number: LCS69175  
NPI: 1760867824  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N



MARIA T BELINSKY

 426 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 690-5900  
Fax: (858) 633-4693  
 After Hours Phone: (760) 690-5900  
 Website: N/A



Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER  
 Hours: M 9AM-4PM  
W-F 9AM-4PM

## **BELINSKY, MARIA**

Provider Gender: Female  
License Number: LCS69175  
NPI: 1760867824  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N

MARIA T BELINSKY

 460 N ELM ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8100  
Fax: (360) 462-2745  
 After Hours Phone: (760) 520-8100  
 Website: N/A



Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **BELINSKY, MARIA**

Provider Gender: Female  
License Number: LCS69175  
NPI: 1760867824  
 Provider English Spoken: Y  
 Spanish

Cultural Competency: N  
MARIA T BELINSKY  
 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  
TDD: U



Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER


## **CARLTON-PENN, CORNELIA**

Provider Gender: Female  
License Number: PSY14310  
NPI: 1891720611

 Provider English Spoken: Y  
 German  
Cultural Competency: N

CORNELIA J CARLTON-PENN

 425 N DATE ST  
ESCONDIDO, CA 92025  
 Phone: (760) 520-8340  
Fax: (858) 633-4698

 After Hours Phone: (760) 520-8340

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y

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# I. 精神健康名录


 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

## CHRISTENSEN, PATTI

Provider Gender: Female


License Number: LCS24129


NPI: 1245434745

 Provider English Spoken: Y  
Cultural Competency: N

PATTI J CHRISTENSEN

 1002 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (760) 741-2660

 After Hours Phone: (760) 741-2660

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8:30AM-5PM

## DOCKERY, LEE

Provider Gender: Male


License Number: A178136


NPI: 1225526320

 Provider English Spoken: Y  
Cultural Competency: N

LEE M DOCKERY

 425 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

 Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## ESTRADA PATINO, ANGELA

Provider Gender: Female

License Number: PSY31789


NPI: 1629339015

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

ANGELA J ESTRADA PATINO

 460 N ELM ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8100


Fax: (360) 462-2745

 After Hours Phone: (760) 520-8100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


TDD: U

Min/Max Age: 14\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM  
SA 8AM-0PM

## FU, KATHERINE

Provider Gender: Female


License Number: A187562


NPI: 1356877807


 Provider English Spoken: Y  
Cultural Competency: N

KATHERINE FU

 704 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (619) 662-4100


 Fax: (619) 662-4196

 After Hours Phone: (619) 662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

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# I. 精神健康名录

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **GUZZO, RICHARD**

Provider Gender: Male


License Number: LCS8288


NPI: 1497898431

 Provider English Spoken: Y  
Cultural Competency: N

RICHARD L GUZZO

 1002 E GRAND AVE  
ESCONDIDO, CA 92025

 Phone: (760) 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

## **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

## **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 Language(s) Spoken: Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER



 Hours: M-F 8AM-5PM

## **MAGOS, DANIEL**

Provider Gender: Male

License Number: LCS88270


NPI: 1578983664

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

DANIEL K MAGOS

 425 N DATE ST  
ESCONDIDO, CA 92025

 Phone: (760) 520-8300

Fax: (858) 633-4698

 After Hours Phone: (760) 520-8300

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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# I. 精神健康名录

 *Accessibility: CONTACT PROVIDER*

## **MARTINEZ, NORAYMA**

*Provider Gender: Female*


*License Number: LCS100019*

*NPI: 1669808267*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**NORAYMA MARTINEZ**

 728 E VALLEY PKWY  
ESCONDIDO, CA 92025

 *Phone: (760) 737-6900*


*Fax: (360) 462-2748*

 *After Hours Phone: (760) 737-6900*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **POSTLETHWAITE, ALEJANDRA**

*Provider Gender: Female*

*License Number: A88938*

*NPI: 1750566915*


 *Provider English Spoken: Y*

 *Spanish*

*Cultural Competency: N*


**ALEJANDRA POSTLETHWAITE**

 425 N DATE ST  
ESCONDIDO, CA 92025

 *Phone: (760) 520-8300*

*Fax: (858) 633-4698*

 *After Hours Phone: (760) 520-8300*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

## **PRASAD, AMITHA**

*Provider Gender: Female*

*License Number: A158657*


*NPI: 1821436882*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**AMITHA, PRASAD**

 2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

 *Phone: (760) 294-9270*

*Fax: (760) 294-9268*

 *After Hours Phone: (760) 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*  
 *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*

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# I. 精神健康名录


 **PROVIDER**  
*Hours: M-F 8AM-5PM*

## **ROBLEDO, DAMIAN**

*Provider Gender: Male*

*License Number: LCS66152*

*NPI: 1376831289*

 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*

**DAMIAN ROBLEDO**


 425 N DATE ST

ESCONDIDO, CA 92025

 *Phone: (760) 520-8340*

*Fax: (360) 462-2752*

 *After Hours Phone: (760) 520-8340*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M 7AM-7:30PM*

*TU 7AM-4:30PM*

*W 7AM-7:30PM*


*TH-F 7AM-4:30PM*

## **RODARTE, GABRIEL**

*Provider Gender: Male*

*License Number: A87906*

*NPI: 1184649212*

 *Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: N*

**GABRIEL RODARTE**


 425 N DATE ST

ESCONDIDO, CA 92025

 *Phone: (760) 520-8340*

*Fax: (858) 633-4698*

 *After Hours Phone: (760) 520-8340*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 18\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):*

 *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 Language(s) Spoken: Spanish*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

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# I. 精神健康名录

## **SUOZZO, JOSEPH**

Provider Gender: Male

License Number: PSY18393

NPI: 1821013228


 Provider English Spoken: Y

Cultural Competency: N

JOSEPH M SUOZZO

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (858) 633-4698

 After Hours Phone: (760)

520-8340

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N


 Accessibility: CONTACT PROVIDER

## **TEETER-WITT, ALYSSA**

Provider Gender: Female

License Number: PSY31075

NPI: 1932308442


 Provider English Spoken: Y

Cultural Competency: N

ALYSSA TEETER-WITT

 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

## **THOMAS, PAULA**

Provider Gender: Female

License Number: LCS29517

NPI: 1821389966


 Provider English Spoken: Y

Cultural Competency: N

PAULA M THOMAS

 425 N DATE ST

ESCONDIDO, CA 92025

 Phone: (760) 520-8340

Fax: (360) 462-2752


 After Hours Phone: (760)

520-8340

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Language(s) Spoken: Spanish, German, French, Cappadocian Greek, Hindi

TDD: U


Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **VALLEZ-BARLAM, ANDREA**

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143

 Provider English Spoken: Y

 German, Spanish

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# I. 精神健康名录

*Cultural Competency: N*  
ANDREA VALLEZ-BARLAM  
426 N DATE ST  
ESCONDIDO, CA 92025  
Phone: (760) 690-5900  
Fax: (858) 633-4693  
After Hours Phone: (760) 690-5900  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER

**VALLEZ-BARLAM, ANDREA**  
Provider Gender: Female  
License Number: PSY9962  
NPI: 1710902143  
Provider English Spoken: Y  
German, Spanish  
Cultural Competency: N  
ANDREA VALLEZ-BARLAM  
488 E VALLEY PKWY STE 404  
ESCONDIDO, CA 92025  
Phone: (760) 466-9800  
Fax: (858) 633-4693  
After Hours Phone: (760) 466-9800  
Website: N/A  
Accepting New Patients: Yes

Site English Spoken: Y  
Site Languages(s) Spoken: German, Spanish  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

**VAQUERO, JUANA**  
Provider Gender: Female  
License Number: PSY28364  
NPI: 1023459708  
Provider English Spoken: Y  
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  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

**WOODWORTH, JENNIFER**  
Provider Gender: Female  
License Number: PSY26963  
NPI: 1639362494  
Provider English Spoken: Y  
Cultural Competency: N  
JENNIFER WOODWORTH  
425 N DATE ST  
ESCONDIDO, CA 92025







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# I. 精神健康名录

 Phone: (760) 520-8340  
Fax: (858) 633-4698  
 After Hours Phone: (760) 520-8340  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER




## FALLBROOK



### GILROY, LAURA


Provider Gender: Female  
License Number: LCS27123  
NPI: 1437427978  
 Provider English Spoken: Y  
 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


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# I. 精神健康名录

TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER








## RODARTE, GABRIEL

Provider Gender: Male  
License Number: A87906  
NPI: 1184649212  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
GABRIEL RODARTE  
 1328 S MISSION RD  
FALLBROOK, CA 92028  
 Phone: (760) 541-4730  
Fax: (760) 457-4700  
 After Hours Phone: (760) 541-4730  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER



## IMPERIAL BEACH





### GONZALEZ, CLAUDIA

Provider Gender: Female  
License Number: LCS100328  
NPI: 1770055543  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
CLAUDIA GONZALEZ  
 949 PALM AVE  
IMPERIAL BEACH, CA 91932  
 Phone: (619) 429-3733  
Fax: (619) 628-5550  
 After Hours Phone: (619) 429-3733  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER






## LA JOLLA

### BAILIS, JESSICA

Provider Gender: Female  
License Number: PSY27537  
NPI: 1760739049  
 Provider English Spoken: Y  
Cultural Competency: N  
JESSICA R BAILIS  
 8950 VILLA LA JOLLA DR  
STE C101  
LA JOLLA, CA 92037

 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## BOOTH, CHRISTOPHER

Provider Gender: Male  
License Number: PSY26073  
NPI: 1568893162  
 Provider English Spoken: Y  
Cultural Competency: N  
CHRISTOPHER R BOOTH  
 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

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# I. 精神健康名录

**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


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# I. 精神健康名录

*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

## 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)

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# I. 精神健康名录

926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: 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

## ELLEDDGE, LINDSAY

Provider Gender: Female  
License Number: LCS96136  
NPI: 1619428828  
 Provider English Spoken: Y  
Cultural Competency: N  
LINDSAY E ELLEDDGE  
 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **HUEGE, STEVEN**

*Provider Gender: Male*


*License Number: C141122*

*NPI: 1598716367*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

STEVEN F HUEGE

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*


*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **HUEGE, STEVEN**

*Provider Gender: Male*

*License Number: C141122*

*NPI: 1598716367*


 *Provider English Spoken: Y*

*Cultural Competency: N*

STEVEN F HUEGE

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*


## **KHAFAJA, MOHAMAD**

*Provider Gender: Male*

*License Number: A115892*

*NPI: 1780867119*

 *Provider English Spoken: Y*


 *Arabic*

*Cultural Competency: N*

MOHAMAD H KHAFAJA

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LASSWELL, EVE**

*Provider Gender: Female*

*License Number: PSY30220*


*NPI: 1013483635*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

EVE N LASSWELL

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*


*American Sign Language (ASL): N*

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# I. 精神健康名录

 *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*


 *Korean*


*Cultural Competency: N*


DAVID J LEE

 9350 CAMPUS POINT DR  
STE LLB

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **LI, XIA**

*Provider Gender: Female*

*License Number: A163344*

*NPI: 1336670413*

 *Provider English Spoken: Y*


 *Mandarin*

*Cultural Competency: N*

XIA LI

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LINKE, SARAH**

*Provider Gender: Female*


*License Number: PSY27116*

*NPI: 1487026415*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

SARAH E LINKE

 8939 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **MAGINOT-CHESHER, TAMARA**

*Provider Gender: Female*

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# I. 精神健康名录


License Number: PSY28678

NPI: 1043441165


 Provider English Spoken: Y  
Cultural Competency: N

TAMARA R MAGINOT  
CHESHER

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (858) 534-7792

Fax: (619) 471-9017

 After Hours Phone: (858)  
534-7792

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

## MARTINEZ, STEPHANIE

Provider Gender: Female

License Number: A152787

NPI: 1699126367


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

STEPHANIE MARTINEZ

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## MAXWELL, BENJAMIN

Provider Gender: Male


License Number: A108124

NPI: 1740415926

 Provider English Spoken: Y  
Cultural Competency: N


BENJAMIN K MAXWELL

 8950 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 Phone: (858) 534-8019

Fax: (858) 534-6727

 After Hours Phone: (858)  
534-8019

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

## MENDEZ, ANDRES

Provider Gender: Male

License Number: PSY28907

NPI: 1841482692

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

ANDRES G MENDEZ


 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## MOORE, SHAVON

Provider Gender: Female

License Number: A152789

NPI: 1053682773

 Provider English Spoken: Y

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# I. 精神健康名录

*Cultural Competency: N*

SHAVON C MOORE


 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

## MOORE, SHAVON

*Provider Gender: Female*

*License Number: A152789*


*NPI: 1053682773*

 *Provider English Spoken: Y*

*Cultural Competency: N*

SHAVON C MOORE

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (800) 826-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
826-8273

 Website: N/A

Accepting New Patients: Yes

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*


 *Hours: M-F 8AM-5PM*

## NGUYEN, HOANG

*Provider Gender: Male*

*License Number: G83977*

*NPI: 1720011620*


 *Provider English Spoken: Y*


 *Vietnamese*

*Cultural Competency: N*

HOANG A NGUYEN

 9300 CAMPUS POINT DR  
LA JOLLA, CA 92037

 Phone: (619) 497-6673

 After Hours Phone: (619)  
497-6673

 Website: N/A

Accepting New Patients: Yes

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

## NGUYEN, HOANG

*Provider Gender: Male*

*License Number: G83977*

*NPI: 1720011620*

 *Provider English Spoken: Y*


 *Vietnamese*

*Cultural Competency: N*

HOANG A NGUYEN

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

*Site English Spoken: Y*


*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT  
PROVIDER*

 *Hours: M-F 8AM-5PM*

## PELHAM, WILLIAM

*Provider Gender: Male*

*License Number: PSY33091*

*NPI: 1306629399*

 *Provider English Spoken: Y*

*Cultural Competency: N*




WILLIAM E PELHAM


 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037



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# I. 精神健康名录

 Phone: (800) 926-8273  
 After Hours Phone: (800) 926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U



Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER

## QAYOUMI, WALI



Provider Gender: Male  
License Number: A168429  
NPI: 1093178220  
 Provider English Spoken: Y  
 French  
Cultural Competency: N  
WALI Z QAYOUMI







 9350 CAMPUS POINT DR  
STE LLB  
LA JOLLA, CA 92037  
 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): NPI: 1679869556  
N

 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM


## QAYOUMI, WALI

Provider Gender: Male  
License Number: A168429  
NPI: 1093178220  
 Provider English Spoken: Y  
 French  
Cultural Competency: N  
WALI Z QAYOUMI


 9500 GILMAN DR STE  
2069  
LA JOLLA, CA 92093  
 Phone: (858) 822-5881  
Fax: (888) 539-8781  
 After Hours Phone: (858) 822-5881  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Hours: M-F 8AM-5PM

## REED, KRISTIE






Provider Gender: Female  
License Number: PSY30934

 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

## 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

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# I. 精神健康名录

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **RICHARD, MARLA**

Provider Gender: Female

License Number: G65188


NPI: 1578720934

 Provider English Spoken: Y  
Cultural Competency: N

MARLA G RICHARD

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **RICHARD, MARLA**

Provider Gender: Female

License Number: G65188


NPI: 1578720934

 Provider English Spoken: Y  
Cultural Competency: N

MARLA G RICHARD

 9300 MEDIAL CENTER DR  
LA JOLLA, CA 92037

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **SCHNEEBERGER, ANDRES**

Provider Gender: Male

License Number: C175502


NPI: 1184867376


 Provider English Spoken: Y  
Cultural Competency: N

ANDRES R SCHNEEBERGER

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **TARLE, STEPHANIE**

Provider Gender: Female

License Number: PSY32155

NPI: 1659920403


 Provider English Spoken: Y  
Cultural Competency: N

STEPHANIE J TARLE

 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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# I. 精神健康名录

 *Accessibility: CONTACT PROVIDER*

## **TARVER, LESLIE**

*Provider Gender: Female*

*License Number: A169181*


*NPI: 1811300957*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

LESLIE B TARVER


 8950 VILLA LA JOLLA DR  
STE C101

LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

## **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*

## **WISHNEK, HANNAH**

*Provider Gender: Female*


*License Number: LCS105699*

*NPI: 1578012043*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

HANNAH K WISHNEK

 8910 VILLA LA JOLLA DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*

*restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT*


*PROVIDER*

## **ZLATAR, ZVINKA**

*Provider Gender: Female*

*License Number: PSY26230*


*NPI: 1497139059*


 *Provider English Spoken: Y*

 *Spanish*

*Cultural Competency: N*

ZVINKA Z ZLATAR

 9444 MEDICAL CENTER DR  
LA JOLLA, CA 92037

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LAKESIDE**

## **BRUNETTO, HEIDI**

*Provider Gender: Female*

*License Number: PSY26809*


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# I. 精神健康名录

NPI: 1023250453

 Provider English Spoken: Y  
Cultural Competency: N

HEIDI M BRUNETTO

 10039 VINE ST  
LAKESIDE, CA 92040

 Phone: (619) 390-9975

Fax: (360) 462-2744

 After Hours Phone: (619)  
390-9975

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-TH 8AM-5PM

## NATIONAL CITY

**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

 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 Language(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

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# I. 精神健康名录

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

## OCEANSIDE







### ACOSTA, AZUCENA

Provider Gender: Female  
License Number: LCS98304  
NPI: 1255937496  
📄 Provider English Spoken: Y  
📄 Spanish  
Cultural Competency: N  
AZUCENA ACOSTA



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# I. 精神健康名录



 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-TU 8AM-5PM  
W 8AM-7PM  
TH-F 8AM-5PM  
SA 9AM-4PM

## ACOSTA, AZUCENA



Provider Gender: Female  
License Number: LCS98304  
NPI: 1255937496  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N

## AZUCENA ACOSTA





 517 N HORNE ST  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
 Website: N/A  
Accepting New Patients: Yes



Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

## ACOSTA, AZUCENA

Provider Gender: Female  
License Number: LCS98304  
NPI: 1255937496  
 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N


## AZUCENA ACOSTA






 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 Phone: (760) 631-5000  
Fax: (760) 414-3892  
 After Hours Phone: (760)  
631-5000  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None



Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

SA 9AM-4PM


## 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 Language(s) Spoken:  
Spanish, Chinese, Farsi  
TDD: U

Min/Max Age: 5\80  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM  
SA 9AM-4PM

## BELL, JENNIFER

Provider Gender: Female  
License Number: 20A20702  
NPI: 1154614956  
 Provider English Spoken: Y  
Cultural Competency: N

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# I. 精神健康名录

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

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

**CHALMERS, VIRGINIA**

Provider Gender: Female

License Number: LCS28053

NPI: 1265613715

Provider English Spoken: Y  
Spanish

Cultural Competency: N

VIRGINIA C CHALMERS

619 CROUCH ST  
OCEANSIDE, CA 92054

Phone: (760) 736-6767

Fax: (760) 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

**CHRISTIANSON, WARREN**

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y  
Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

818 PIER VIEW WAY  
OCEANSIDE, CA 92054

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-7PM  
F 8AM-5PM

SA 9AM-4PM

**CHRISTIANSON, WARREN**

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

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# I. 精神健康名录


 Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 517 N HORNE ST

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER


 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II


 4700 N RIVER RD

OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male

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# I. 精神健康名录

License Number: 20A9664  
NPI: 1932359445  
☐ Provider English Spoken: Y  
☐ Spanish  
Cultural Competency: N  
WARREN R CHRISTIANSON II  
📍 517 N HORNE ST  
OCEANSIDE, CA 92054  
☎ Phone: (760) 631-5000  
Fax: (760) 414-3892  
🕒 After Hours Phone: (760)  
631-5000  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
🕒 Hours: M-TH 8AM-7PM  
F 8AM-5PM  
SA 9AM-4PM

## COOK, SHERYL

Provider Gender: Female  
License Number: PSY15449  
NPI: 1750420816  
☐ Provider English Spoken: Y  
Cultural Competency: N  
SHERYL G COOK  
📍 619 CROUCH ST STE 100  
OCEANSIDE, CA 92054  
☎ Phone: (760) 736-6767

Fax: (760) 736-6744  
🕒 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 9AM-6:15PM  
W 9AM-6PM

## CRUZ, VANESSA

Provider Gender: Female  
License Number: LCS87166  
NPI: 1285170662  
☐ Provider English Spoken: Y  
Cultural Competency: N  
VANESSA Y CRUZ  
📍 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

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# I. 精神健康名录

 *Provider English Spoken: Y*  
*Cultural Competency: N*

VANESSA Y CRUZ

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 4\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-TH 9AM-7PM*  
*F 9AM-5PM*  
*SA 9AM-4PM*

## **CRUZ, VANESSA**

*Provider Gender: Female*


*License Number: LCS87166*

*NPI: 1285170662*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

VANESSA Y CRUZ

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

## **DOUGHERTY, CHRISTINE**

*Provider Gender: Female*


*License Number: LCS26686*

*NPI: 1003194960*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

CHRISTINE A DOUGHERTY

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*  
*N*


 *Accessibility: CONTACT*  
*PROVIDER*

## **DOUGHERTY, CHRISTINE**

*Provider Gender: Female*


*License Number: LCS26686*

*NPI: 1003194960*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

CHRISTINE A DOUGHERTY

 517 N HORNE ST  
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

## **DOUGHERTY, CHRISTINE**

*Provider Gender: Female*


*License Number: LCS26686*

*NPI: 1003194960*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

CHRISTINE A DOUGHERTY


 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*

 *After Hours Phone: (760)*  
*631-5000*

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# I. 精神健康名录

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 8AM-4PM


## JENSEN, BRIAN

Provider Gender: Male  
License Number: PSY26041  
NPI: 1518138049


 Provider English Spoken: Y  
Cultural Competency: N

BRIAN M JENSEN

 619 CROUCH ST  
OCEANSIDE, CA 92054

 Phone: (760) 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

## MENDEZ, ADRIANA

Provider Gender: Female  
License Number: LCS86435  
NPI: 1356777361


 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 818 PIER VIEW WAY

OCEANSIDE, CA 92054

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None



Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## MENDEZ, ADRIANA


Provider Gender: Female  
License Number: LCS86435  
NPI: 1356777361

 Provider English Spoken: Y  
 Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender

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# I. 精神健康名录

restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **MENDEZ, ADRIANA**

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361


Provider English Spoken: Y

Spanish

Cultural Competency: N

ADRIANA J MENDEZ

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

## **MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299


NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

## **MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299


NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 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

## **MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299


NPI: 1487196333

Provider English Spoken: Y

Cultural Competency: N

GRETA R MEYERHOF

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL): N

 Accessibility: CONTACT  
PROVIDER

## **MONTEZ, REBECCA**




Provider Gender: Female


License Number: LCS26869

NPI: 1396047809

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# I. 精神健康名录

 *Provider English Spoken: Y*  
 *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  
 517 N HORNE ST  
OCEANSIDE, CA 92054  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
 *Website: N/A*  
*Accepting New Patients: Yes*

*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*

## **NEVILLE, MARGARET**

*Provider Gender: Female*  
*License Number: LCS82407*  
*NPI: 1073682407*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
MARGARET R NEVILLE  
 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
 *Website: N/A*


*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*

## **NEVILLE, MARGARET**






*Provider Gender: Female*

*License Number: LCS82407*  
*NPI: 1073682407*

 *Provider English Spoken: Y*  
*Cultural Competency: N*  
MARGARET R NEVILLE  
 4700 N RIVER RD  
OCEANSIDE, CA 92057  
 *Phone: (760) 631-5000*  
*Fax: (760) 414-3892*  
 *After Hours Phone: (760)*  
*631-5000*  
 *Website: N/A*

*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*

## **ORTIZ, BEVERLY**

*Provider Gender: Female*  
*License Number: MFC121355*  
*NPI: 1760826572*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
BEVERLY L ORTIZ  
 2210 MESA DR STE 300  
OCEANSIDE, CA 92054  
 *Phone: (760) 736-6767*  
*Fax: (760) 736-6744*  
 *After Hours Phone: (760)*  
*736-6767*  
 *Website: N/A*

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# I. 精神健康名录

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## **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

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M 8AM-5PM  
TU 10AM-7PM

W-F 8AM-5PM


SA 9AM-4PM

## **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

## **SANCHEZ, ADRIANA**

Provider Gender: Female

License Number: LCS97093

NPI: 1609450451


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

ADRIANA SANCHEZ

 4700 N RIVER RD  
OCEANSIDE, CA 92057


 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

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# I. 精神健康名录

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

## **SANCHEZ, ADRIANA**


Provider Gender: Female  
License Number: LCS97093  
NPI: 1609450451

Provider English Spoken: Y  
 Spanish

Cultural Competency: N  
ADRIANA SANCHEZ

 818 PIER VIEW WAY  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892


 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N



 Accessibility: CONTACT PROVIDER

## **SANCHEZ, ADRIANA**

Provider Gender: Female  
License Number: LCS97093  
NPI: 1609450451

Provider English Spoken: Y  
 Spanish

Cultural Competency: N  
ADRIANA SANCHEZ

 517 N HORNE ST  
OCEANSIDE, CA 92054  
 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000


 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-4PM


## **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

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# I. 精神健康名录


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## 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

N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

SONYA L SMITH

 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

N


 Accessibility: CONTACT PROVIDER

## SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

SONYA L SMITH

 517 N HORNE ST  
OCEANSIDE, CA 92054

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

N

 Accessibility: CONTACT PROVIDER

## SMITH, SONYA

Provider Gender: Female

License Number: LCS82598

NPI: 1902070857


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

SONYA L SMITH

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 Phone: (760) 631-5000

Fax: (760) 414-3892

 After Hours Phone: (760) 631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

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# I. 精神健康名录

N

 *Accessibility: CONTACT PROVIDER*


## **WILSON, CARLENE**

*Provider Gender: Female  
License Number: LCS74685  
NPI: 1508327081*

 *Provider English Spoken: Y  
Cultural Competency: N*

CARLENE WILSON

 4700 N RIVER RD  
OCEANSIDE, CA 92057

 *Phone: (760) 631-5000  
Fax: (760) 414-3892*

 *After Hours Phone: (760) 631-5000*

 *Website: N/A*


*Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

## **WILSON, CARLENE**


*Provider Gender: Female  
License Number: LCS74685  
NPI: 1508327081*

 *Provider English Spoken: Y  
Cultural Competency: N*

CARLENE WILSON

 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*

## **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 Language(s) Spoken: Spanish*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

### **MODHWADIA, MAMTA**

*Provider Gender: Female  
License Number: A113990*

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# I. 精神健康名录

NPI: 1043353667


 Provider English Spoken: Y

 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

**POSTLETHWAITE,**

**ALEJANDRA**

Provider Gender: Female

License Number: A88938


NPI: 1750566915


 Provider English Spoken: Y

 Spanish

Cultural Competency: N


ALEJANDRA POSTLETHWAITE

 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

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

**STREET, KYLE**

Provider Gender: Male

License Number: 20A21304


NPI: 1457912131

 Provider English Spoken: Y

Cultural Competency: N


KYLE A STREET

 13010 POWAY RD  
POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (360) 462-2742

 After Hours Phone: (858)  
218-3000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

**VALLEZ-BARLAM, ANDREA**

Provider Gender: Female

License Number: PSY9962

NPI: 1710902143


 Provider English Spoken: Y

 German, Spanish

Cultural Competency: N

ANDREA VALLEZ-BARLAM

 13010 POWAY RD  
POWAY, CA 92064

 Phone: (858) 218-3000


Fax: (858) 633-4688

 After Hours Phone: (858)  
218-3000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 9AM-5PM

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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# I. 精神健康名录

## 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

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

### 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

### BANKS, SARAH

Provider Gender: Female

License Number: PSY30296

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# I. 精神健康名录


NPI: 1164701132

 Provider English Spoken: Y  
Cultural Competency: N


SARAH J BANKS

 6655 ALVARADO RD  
SAN DIEGO, CA 92120

 Phone: (800) 926-8273

 Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

## **BANKS, SARAH**

Provider Gender: Female


License Number: PSY30296


NPI: 1164701132

 Provider English Spoken: Y  
Cultural Competency: N

SARAH J BANKS

 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **BANKS, SARAH**

Provider Gender: Female

License Number: PSY30296

NPI: 1164701132


 Provider English Spoken: Y  
Cultural Competency: N


SARAH J BANKS

 4510 EXECUTIVE DR STE  
325

SAN DIEGO, CA 92121

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **BARRON, KAVITA**

Provider Gender: Female

License Number: A155596


NPI: 1821418542


 Provider English Spoken: Y  
Cultural Competency: N

KAVITA BARRON

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **BASS, GURGIANA**

Provider Gender: 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

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# I. 精神健康名录

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-0PM  
W 8AM-4:30PM  
TH 8AM-0PM

## BASS, GURGIANA

Provider Gender: Female


License Number: PSY24750

NPI: 1639325277

 Provider English Spoken: Y  
Cultural Competency: N

GURGIANA BASS

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700  
Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## BREEDLOVE, AMANDA


Provider Gender: Female


License Number: MFC139230


NPI: 1316487119

 Provider English Spoken: Y  
Cultural Competency: N

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 Language(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## BROWN, DARCIE

Provider Gender: Female


License Number: MFC119851

NPI: 1639796071

 Provider English Spoken: Y  
Cultural Competency: N

DARCIE D BROWN

 16950 VIA TAZON  
SAN DIEGO, CA 92127

 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## CALLAGHAN, KATHRYN

Provider Gender: Female


License Number: MFC106901

NPI: 1558768812

 Provider English Spoken: Y  
Cultural Competency: N

KATHRYN R CALLAGHAN

 2630 1ST AVE  
SAN DIEGO, CA 92103

 Phone: (619) 234-2158  
Fax: (619) 234-0206

 After Hours Phone: (619)  
234-2158

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Language(s) Spoken:

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# I. 精神健康名录

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) 279-9025

Fax: (858) 633-4680

After Hours Phone: (858)  
279-9025

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

## **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

## **CHESHER, NICHOLAS**

Provider Gender: Male  
License Number: PSY29290

NPI: 1124539697

Provider English Spoken: Y  
Cultural Competency: N

NICHOLAS J CHESHER

200 W ARBOR DR

SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

## **CHOI, MIN**

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

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# I. 精神健康名录

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-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

 8001 FROST ST  
SAN DIEGO, CA 92123

 Phone: (858) 576-1700  
Fax: (858) 966-8164

 After Hours Phone: (858) 576-1700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **CIOBANU, COSMINA**

Provider Gender: Female


License Number: A137628

NPI: 1285049932

 Provider English Spoken: Y  
Cultural Competency: N

COSMINA S CIOBANU

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 576-1700  
Fax: (858) 966-8164

 After Hours Phone: (858) 576-1700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **CIOBANU, COSMINA**

Provider Gender: Female


License Number: A137628


NPI: 1285049932

 Provider English Spoken: Y  
Cultural Competency: N

COSMINA S CIOBANU

 4510 EXECUTIVE DR STE  
315

 SAN DIEGO, CA 92121  
Phone: (858) 534-8019

 After Hours Phone: (858) 534-8019

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

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# I. 精神健康名录


 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

 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

 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

## **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

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

**PROVIDER**  
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

Spanish

Cultural Competency: N

JAENAI DIAZ

350 DICKINSON ST  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

## **DIOKNO, RHODA**

Provider Gender: Female

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):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-6PM

## **DOSS, KATIE**

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979

Provider English Spoken: Y

Cultural Competency: N

KATIE L DOSS

7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 810-8700

Fax: (858) 633-4680

After Hours Phone: (858)  
810-8700

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

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至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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# I. 精神健康名录

## **DOSS, KATIE**

Provider Gender: Female

License Number: LCS112693

NPI: 1134825979

Provider English Spoken: Y  
Cultural Competency: N

KATIE L DOSS

6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

Phone: (858) 279-0925

Fax: (858) 633-4680

After Hours Phone: (858)  
279-0925

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **DSOUZA, NICOLE**

Provider Gender: Male

License Number: LCS101958

NPI: 1225462799

Provider English Spoken: Y  
Cultural Competency: N

NICOLE A DSOUZA

330 LEWIS ST  
SAN DIEGO, CA 92103

Phone: (800) 926-8273

Fax: (888) 539-8781

After Hours Phone: (800)  
926-8273

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

## **DUNN-PIRIO, ANASTASIE**

Provider Gender: Female

License Number: A157861

NPI: 1700177136

Provider English Spoken: Y  
Cultural Competency: N

ANASTASIE M DUNN-PIRIO

200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103

Phone: (619) 543-3500

Fax: (888) 539-8781

After Hours Phone: (619)  
543-3500

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-5PM

## **ESTAVILLO, SAUL**

Provider Gender: Male

License Number: MFC102610

NPI: 1528330073

Provider English Spoken: Y

Spanish

Cultural Competency: N

SAUL J ESTAVILLO

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

## **ESTAVILLO, SAUL**


Provider Gender: Male

License Number: MFC102610

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

NPI: 1528330073

 Provider English Spoken: Y


 Spanish

Cultural Competency: N

SAUL J ESTAVILLO

 286 EUCLID AVE STE 309

SAN DIEGO, CA 92114

 Phone: (619) 527-7390

Fax: (619) 527-7394

 After Hours Phone: (619)  
527-7390

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


 Site Language(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-5PM

## **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

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# I. 精神健康名录

235  
SAN DIEGO, CA 92126  
☎ Phone: (844) 200-2426  
☎ Fax: (858) 578-4417  
🕒 After Hours Phone: (844) 200-2426  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-F 8AM-6PM

## **FORZANI, CHRISTINA**

Provider Gender: Female  
License Number: PSY25710  
NPI: 1902939630  
☑ Provider English Spoken: Y  
Cultural Competency: N  
CHRISTINA A FORZANI  
📍 4290 POLK AVE  
SAN DIEGO, CA 92105  
☎ Phone: (619) 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Site English Spoken: Y


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: 143775863


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

JENNI GARCIA

 3025 BEYER BLVD  
SAN DIEGO, CA 92154

 Phone: (619) 662-4100


Fax: (619) 662-4119

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER


 Hours: M-F 8AM-5PM

## GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419


NPI: 1376824383

 Provider English Spoken: Y


Cultural Competency: N

KRISTEN M GIAMONA

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925

Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## GIAMONA, KRISTEN

Provider Gender: Female

License Number: PSY28419


NPI: 1376824383

 Provider English Spoken: Y

Cultural Competency: N

KRISTEN M GIAMONA

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 810-8700

Fax: (858) 633-4680

 After Hours Phone: (858)  
810-8700

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## GOMEZ, JUANITA

Provider Gender: Female

License Number: PSY27439

NPI: 1790915759


 Provider English Spoken: Y

 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


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# I. 精神健康名录

*American Sign Language (ASL):* SILVIA E HERNANDEZ

N

 *Accessibility: CONTACT PROVIDER*

## **GULOTTA, SAMANTHA**

*Provider Gender: Female*

*License Number: MFC134199*

*NPI: 1790407732*


*Provider English Spoken: Y*  
*Cultural Competency: N*

SAMANTHA L GULOTTA

 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):* YASH B JOSHI

N

 *Accessibility: CONTACT PROVIDER*

## **HERNANDEZ, SILVIA**

*Provider Gender: Female*


*License Number: MFC51787*

*NPI: 1982821179*


*Provider English Spoken: Y*  
 *Spanish*

*Cultural Competency: N*

 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*

## **JOSHI, YASH**

*Provider Gender: Male*

*License Number: A147156*

*NPI: 1598151433*


*Provider English Spoken: Y*  
*Cultural Competency: N*

*American Sign Language (ASL):* YASH B JOSHI

 200 W ARBOR DR

SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*

*restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **KAYE, WALTER**

*Provider Gender: Male*

*License Number: A24819*


*NPI: 1922076223*


*Provider English Spoken: Y*  
*Cultural Competency: N*

WALTER H KAYE

 4510 EXECUTIVE DR

SAN DIEGO, CA 92121

 *Phone: (858) 534-8019*

 *After Hours Phone: (858) 534-8019*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

N

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **KHAFAJA, MOHAMAD**

*Provider Gender: Male*







*License Number: A115892*






*NPI: 1780867119*


*Provider English Spoken: Y*







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# I. 精神健康名录







 Arabic  
Cultural Competency: N  
MOHAMAD H KHAF AJA  
 200 W ARBOR DR  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM







**KHAMISA, SORAIYA**  
Provider Gender: Female  
License Number: LCS81951  
NPI: 1811254386  
 Provider English Spoken: Y  
Cultural Competency: N  
SORAIYA N KHAMISA  
 4520 EXECUTIVE DR STE A  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y

TDD: U  
Min/Max Age: 0\None  
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

**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

**LABIB, MICHAEL**  
Provider Gender: Male  
License Number: PSY34180  
NPI: 1609055797  
 Provider English Spoken: Y  
 Arabic  
Cultural Competency: N  
MICHAEL LABIB  
 1666 PRECISION PARK LN  
SAN DIEGO, CA 92173  
 Phone: (619) 662-4100  
Fax: (619) 785-3384  
 After Hours Phone: (619)  
662-4100  
 Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：  
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# I. 精神健康名录

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

## LIDLAW, JOHN

Provider Gender: Male

License Number: MFC44560

NPI: 1689790073

Provider English Spoken: Y  
Cultural Competency: N

JOHN K LIDLAW

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

## 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*

## **LEE, DAVID**

*Provider Gender: Male*

*License Number: A124329*

*NPI: 1871884130*


 *Provider English Spoken: Y*


 *Korean*


*Cultural Competency: N*

DAVID J LEE

 200 W ARBOR DR FL 1  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **LI, XIA**

*Provider Gender: Female*

*License Number: A163344*

*NPI: 1336670413*

 *Provider English Spoken: Y*


 *Mandarin*

*Cultural Competency: N*

XIA LI


 16918 DOVE CANYON RD  
STE 100

SAN DIEGO, CA 92127

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **LINKE, SARAH**

*Provider Gender: Female*


*License Number: PSY27116*

*NPI: 1487026415*


 *Provider English Spoken: Y*

*Cultural Competency: N*

SARAH E LINKE

 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-5PM*

## **LINKE, SARAH**

*Provider Gender: Female*

*License Number: PSY27116*

*NPI: 1487026415*


 *Provider English Spoken: Y*

*Cultural Competency: N*

SARAH E LINKE


 4910 DIRECTORS PL STE  
250

SAN DIEGO, CA 92121

 *Phone: (800) 926-8273*

*Fax: (888) 539-8781*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



# I. 精神健康名录

**PROVIDER**  
🕒 Hours: M-F 8AM-5PM

## **LIU, TIMOTHY**

Provider Gender: Male  
License Number: A105535  
NPI: 1720262801  
🗨️ Provider English Spoken: Y  
🗨️ 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

## **LIU, TIMOTHY**

Provider Gender: Male  
License Number: A105535  
NPI: 1720262801

🗨️ Provider English Spoken: Y  
🗨️ 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

## **LONGARDNER, KATHERINE**

Provider Gender: Female  
License Number: A137963  
NPI: 1801215926

🗨️ Provider English Spoken: Y  
Cultural Competency: N

KATHERINE M LONGARDNER

📍 4520 EXECUTIVE DR  
SAN DIEGO, CA 92121

📞 Phone: (800) 926-8273  
📠 Fax: (888) 539-8781

🕒 After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

## **MAGINOT-CHESTER, TAMARA**

Provider Gender: Female  
License Number: PSY28678  
NPI: 1043441165

🗨️ Provider English Spoken: Y  
Cultural Competency: N

TAMARA R MAGINOT  
CHESTER

📍 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121

📞 Phone: (858) 534-8019  
📠 Fax: (858) 534-6727

🕒 After Hours Phone: (858) 534-8019

🌐 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N




♿ Accessibility: CONTACT PROVIDER



🕒 Hours: M-F 8AM-5PM

## **MALAK, LAWRENCE**





了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。





# I. 精神健康名录

*Provider Gender: Male*  
*License Number: A115345*  
*NPI: 1467773028*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**LAWRENCE T MALAK**  
 4290 POLK AVE  
SAN DIEGO, CA 92105  
 *Phone: (619) 563-0250*  
*Fax: (858) 633-4681*  
 *After Hours Phone: (619) 563-0250*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 14\None*







*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-F 8AM-5PM SA 8AM-2PM*


## **MARTINEZ, STEPHANIE**

*Provider Gender: Female*  
*License Number: A152787*  
*NPI: 1699126367*  
 *Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: N*  
**STEPHANIE MARTINEZ**  
 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*  
 *Spanish*  
*Cultural Competency: N*  
**STEPHANIE MARTINEZ**  
 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*

*restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

## **MARTINEZ, STEPHANIE**

*Provider Gender: Female*  
*License Number: A152787*  
*NPI: 1699126367*  
 *Provider English Spoken: Y*  
 *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*

## **MCCULLUM, TIFFANY**

*Provider Gender: Female*  
*License Number: PSY29329*  
*NPI: 1528306206*


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# I. 精神健康名录


 *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*

## **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*  
 *Spanish*

*Cultural Competency: N*


BRAD A MILLS

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 *Phone: (619) 233-8500*


*Fax: (619) 687-1067*

 *After Hours Phone: (619)*  
*233-8500*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Languages(s) Spoken:*  
*Spanish*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender*  
*restriction*

*American Sign Language (ASL):*  
*N*

 *Accessibility: CONTACT*  
*PROVIDER*

 *Hours: M-F 8AM-5PM*

## **MIRON, JEAN-PHILIPPE**

*Provider Gender: Male*

*License Number: A186033*

*NPI: 1952178196*


 *Provider English Spoken: Y*  
*Cultural Competency: N*

JEAN-PHILIPPE MIRON

 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*



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# I. 精神健康名录


JESSICA L MONTOYA

 4168 FRONT ST FL 3  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

**MOORE, SHAVON**



Provider Gender: Female  
License Number: A152789  
NPI: 1053682773  
 Provider English Spoken: Y  
Cultural Competency: N

SHAVON C MOORE



 4510 EXECUTIVE DR  
SAN DIEGO, CA 92121  
 Phone: (800) 926-8273  
 After Hours Phone: (800)  
926-8273  
 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction


American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

**MUHAMMAD, LAMA**

Provider Gender: Female  
License Number: A156500  
NPI: 1558701623  
 Provider English Spoken: Y  
 Arabic



Cultural Competency: N  
LAMA MUHAMMAD

 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 Phone: (800) 926-8273  
Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273  
 Website: N/A

Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U



Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
 Hours: M-F 8AM-5PM

**MUHAMMAD, LAMA**


Provider Gender: Female

License Number: A156500  
NPI: 1558701623

 Provider English Spoken: Y  
 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



**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)

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# I. 精神健康名录

534-8019  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

## NGUYEN, HOANG

Provider Gender: Male  
License Number: G83977  
NPI: 1720011620  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: N  
HOANG A NGUYEN  
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, HOANG

Provider Gender: Male  
License Number: G83977  
NPI: 1720011620  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: N  
HOANG A NGUYEN  
410 DICKINSON ST STE 100  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

Provider Gender: Male  
License Number: G83977  
NPI: 1720011620  
Provider English Spoken: Y  
Vietnamese  
Cultural Competency: N  
HOANG A NGUYEN  
200 W ARBOR DR  
SAN DIEGO, CA 92103  
Phone: (800) 926-8273  
After Hours Phone: (800) 926-8273  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
Accessibility: CONTACT PROVIDER  
Hours: M-F 8AM-5PM

## NING, GRACE

Provider Gender: Female  
License Number: PSY27293  
NPI: 1598911315  
Provider English Spoken: Y  
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

## NING, GRACE

Provider Gender: Female  
License Number: PSY27293  
NPI: 1598911315  
Provider English Spoken: Y  
Chinese, Mandarin  
Cultural Competency: N  
GRACE J NING  
7011 LINDA VISTA RD  
SAN DIEGO, CA 92111  
Phone: (858) 810-8700  
Fax: (858) 633-4680  
After Hours Phone: (858) 810-8700  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 18\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

*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*

*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*

 *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*

## **PATTERSON-HYATT,**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录



## **KIMBERLY**

Provider Gender: Female  
License Number: PSY31903  
NPI: 1780997742

 Provider English Spoken: Y  
Cultural Competency: N

## **KIMBERLY G**

### **PATTERSON-HYATT**

 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115  
 Phone: (619) 662-4100  
Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM


## **PATTON, MICHAEL**

Provider Gender: Male  
License Number: LCS18244  
NPI: 1184756702

 Provider English Spoken: Y  
Cultural Competency: N


## **MICHAEL A PATTON**

 1501 IMPERIAL AVE  
SAN DIEGO, CA 92101

 Phone: (619) 233-8500

Fax: (619) 687-1067

 After Hours Phone: (619)  
233-8500

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


## **PRINCE, RENEE**

Provider Gender: Female  
License Number: PSY32206  
NPI: 1467737908

 Provider English Spoken: Y  
Cultural Competency: N

## **RENEE K PRINCE**

 10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126

 Phone: (844) 200-2426

Fax: (619) 474-4008

 After Hours Phone: (844)  
200-2426

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-6PM

## **QAYOUMI, WALI**

Provider Gender: Male  
License Number: A168429  
NPI: 1093178220

 Provider English Spoken: Y


 French

Cultural Competency: N

## **WALI Z QAYOUMI**

 4510 EXECUTIVE DR STE  
325

SAN DIEGO, CA 92121

 Phone: (619) 294-3746

Fax: (888) 539-8781

 After Hours Phone: (619)  
294-3746

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER































 Hours: M-F 8AM-5PM

## **RADOJEVIC, NATASHA**

Provider Gender: Female  
License Number: PSY28495  
NPI: 1821365008

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至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

-  *Provider English Spoken: Y*  
*Cultural Competency: N*  
**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: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
 *Hours: M-TU 8:30AM-5:30PM TH-F 8:30AM-5:30PM*
- RIBEIRO CALDAS DOMINGUES, ISABEL**  
*Provider Gender: Female*  
*License Number: A132160*  
*NPI: 1023367216*  
 *Provider English Spoken: Y*  
 *French, Portuguese, Spanish*  
*Cultural Competency: N*  
**ISABEL A RIBEIRO CALDAS DOMINGUES**  
 350 DICKINSON ST  
SAN DIEGO, CA 92103  
 *Phone: (800) 926-8273*  
*Fax: (888) 539-8781*  
 *After Hours Phone: (800) 926-8273*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: 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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




# I. 精神健康名录


*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*

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

## **SACHS, MELISSA**

*Provider Gender: Female*

*License Number: LCS76968*

*NPI: 1649760356*


 *Provider English Spoken: Y*

*Cultural Competency: N*

**MELISSA R SACHS**

 4690 EL CAJON BLVD

SAN DIEGO, CA 92115

 Phone: (619) 662-4100

Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL): N*

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*

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**

 7920 FROST ST STE 200

SAN DIEGO, CA 92123

 Phone: (858) 246-0794

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Fax: (858) 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

📍 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): KRISTON B SCHELLINGER

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

📍 9909 MIRA MESA BLVD  
STE 200

SAN DIEGO, CA 92131

☎ Phone: (858) 246-1979

☎ After Hours Phone: (858) 246-1979

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

🕒 Hours: M-F 8AM-5PM

## SCHELLINGER, KRISTON

Provider Gender: Female

License Number: PSY26313

NPI: 1710234273

☑ Provider English Spoken: Y  
Cultural Competency: N

KRISTON B SCHELLINGER

📍 9333 GENESEE AVE STE  
200

SAN DIEGO, CA 92121

☎ Phone: (800) 926-8273

☎ After Hours Phone: (800) 926-8273

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None


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# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SCHLOSSER, TARA**

*Provider Gender: Female*


*License Number: MFC107868*


*NPI: 1407220437*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**TARA S SCHLOSSER**

 330 LEWIS ST  
SAN DIEGO, CA 92103

 *Phone: (800) 926-8273*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*

## **SERIO, TAYLOR**

*Provider Gender: Female*

*License Number: LCS107050*


*NPI: 1093217382*

 *Provider English Spoken: Y*


*Cultural Competency: N*


**TAYLOR L SERIO**

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 279-0925*

*Fax: (858) 633-4680*

 *After Hours Phone: (858) 279-0925*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SERIO, TAYLOR**

*Provider Gender: Female*


*License Number: LCS107050*

*NPI: 1093217382*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**TAYLOR L SERIO**

 7011 LINDA VISTA RD  
SAN DIEGO, CA 92111

 *Phone: (858) 810-8700*

*Fax: (858) 633-4680*

 *After Hours Phone: (858) 810-8700*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SHU, I WEI**

*Provider Gender: Male*


*License Number: A103813*

*NPI: 1992840144*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**I WEI SHU**

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 *Phone: (858) 534-6200*

*Fax: (858) 534-6205*

 *After Hours Phone: (800) 926-8273*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **SILVEY, CHRISTOPHER**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

*Provider Gender: Male*  
*License Number: LCS85942*  
*NPI: 1932793502*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**CHRISTOPHER J SILVEY**  
 10737 CAMINO RUIZ STE  
235  
SAN DIEGO, CA 92126  
 *Phone: (858) 578-4220*  
*Fax: (858) 578-4417*  
 *After Hours Phone: (858)*  
*578-4220*  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*

## **SOLORIO JR, ROBERTO**

*Provider Gender: Male*  
*License Number: LCS102729*  
*NPI: 1972088185*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**ROBERTO SOLORIO JR**  
 4690 EL CAJON BLVD  
SAN DIEGO, CA 92115  
 *Phone: (619) 662-4100*  
 *After Hours Phone: (619)*

662-4100  
 *Website: N/A*  
*Accepting New Patients: Yes*  
*Site English Spoken: Y*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*

## **SUAREZ, ROBERTO**

*Provider Gender: Male*  
*License Number: MFC25098*  
*NPI: 1386785160*  
 *Provider English Spoken: Y*  
 *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*  
 *Hours: M-F 8AM-5PM*

## **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 Language(s) Spoken:*  
*Spanish*  
*TDD: U*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
*PROVIDER*  
 *Hours: M-F 8AM-5PM*






## **TARLE, STEPHANIE**

*Provider Gender: Female*  
*License Number: PSY32155*  
*NPI: 1659920403*  
 *Provider English Spoken: Y*  
*Cultural Competency: N*  
**STEPHANIE J TARLE**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




# I. 精神健康名录




 6655 ALVARADO RD  
SAN DIEGO, CA 92120  
 Phone: (800) 926-8273  
Fax: (888) 539-8781  
 After Hours Phone: (800)  
926-8273  
 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER




## TILTON, PETER

Provider Gender: Male  
License Number: G27781  
NPI: 1538258694  
 Provider English Spoken: Y  
Cultural Competency: N  
PETER A TILTON  
 2630 1ST AVE  
SAN DIEGO, CA 92103  
 Phone: (619) 234-2158  
Fax: (619) 234-0206  
 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  
 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

 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

## TO, TUAN

Provider Gender: Male  
License Number: PSY30204  
NPI: 1255696183  
 Provider English Spoken: Y  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

Site English Spoken: Y

TDD: U

Min/Max Age: 5\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

## TROYER, EMILY

Provider Gender: Female

License Number: A149101

NPI: 1326484437


 Provider English Spoken: Y

Cultural Competency: N

EMILY A TROYER

 4290 POLK AVE

SAN DIEGO, CA 92105

 Phone: (619) 563-0250


Fax: (858) 633-4681

 After Hours Phone: (619) 563-0250

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

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

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# I. 精神健康名录

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## WU, MICHELLE

Provider Gender: Female

License Number: A125139


NPI: 1043650088

 Provider English Spoken: Y


Cultural Competency: N

MICHELLE L WU

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 Phone: (858) 966-8145

Fax: (858) 966-8164

 After Hours Phone: (858)  
966-8145

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\19

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM


## YAGUDAYEVA, RAISA

Provider Gender: Female

License Number: 20A14848

NPI: 1942555990


 Provider English Spoken: Y

 Russian

Cultural Competency: N

RAISA YAGUDAYEVA

 200 W ARBOR DR  
SAN DIEGO, CA 92103

 Phone: (800) 926-8273

Fax: (888) 539-8781

 After Hours Phone: (800)  
926-8273

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N


 Accessibility: CONTACT PROVIDER

## YIDI, DIANA

Provider Gender: Female

License Number: LCS110300

NPI: 1194438663


 Provider English Spoken: Y

 Spanish

Cultural Competency: N

DIANA L YIDI

 6973 LINDA VISTA RD  
SAN DIEGO, CA 92111

 Phone: (858) 279-0925


Fax: (858) 633-4680

 After Hours Phone: (858)  
279-0925

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Language(s) Spoken:  
Spanish


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F  
8:30AM-5:30PM

## ZAYAS, MARIO

Provider Gender: Male

License Number: MFC111273

NPI: 1275943557

 Provider English Spoken: Y


 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

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# I. 精神健康名录


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-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  
 Spanish

Cultural Competency: N

LEON ALTAMIRANO

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)  
736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 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 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760)  
736-6767

 Website: N/A


Accepting New Patients: Yes

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# I. 精神健康名录

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 5\50

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER


 Hours: M-F 8AM-5PM

## CABREJOS, CLAUDIO

Provider Gender: Male

License Number: A71653

NPI: 1033133483


 Provider English Spoken: Y

 Portuguese, Spanish

Cultural Competency: N


CLAUDIO O CABREJOS

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U


Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT

PROVIDER


 Hours: M-F 8AM-5PM

## FLYNN, DANIELLE

Provider Gender: Female

License Number: PSY26184


NPI: 1477785137

 Provider English Spoken: Y

Cultural Competency: N

DANIELLE I FLYNN

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 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 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767

Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

## IMAM, SYED

Provider Gender: Male

License Number: PSY27695

NPI: 1447428271


 Provider English Spoken: Y

 Hindi, Urdu

Cultural Competency: N

SYED IMAM

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 Phone: (760) 736-6767


Fax: (760) 736-6744

 After Hours Phone: (760) 736-6767

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

TDD: U

Min/Max Age: 15\None

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# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-5PM*

## **REEG, JESSICA**

*Provider Gender: Female*

*License Number: MFC124306*

*NPI: 1144382987*


 *Provider English Spoken: Y*

 *Spanish*

*Cultural Competency: N*

JESSICA REEG

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

*Fax: (760) 736-6744*

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-8PM  
SA 8AM-5PM*

## **SOLORIO JR, ROBERTO**

*Provider Gender: Male*

*License Number: LCS102729*


*NPI: 1972088185*

 *Provider English Spoken: Y*

*Cultural Competency: N*

ROBERTO SOLORIO JR

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

*Fax: (760) 736-8740*

 *After Hours Phone: (760) 736-6767*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*


 *Accessibility: CONTACT PROVIDER*

## **TONG, GARRICK**

*Provider Gender: Male*

*License Number: A102192*

*NPI: 1831361278*


 *Provider English Spoken: Y*

 *Cantonese*

*Cultural Competency: N*

GARRICK G TONG

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

*Fax: (760) 736-6744*

 *After Hours Phone: (760)*

*736-6767*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Language(s) Spoken: Spanish*


*TDD: U*

*Min/Max Age: 4\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*


 *Hours: M-F 8AM-8PM  
SA 8AM-5PM*

## **TORRES, HECTOR**

*Provider Gender: Male*

*License Number: PSY13309*

*NPI: 1720265614*


 *Provider English Spoken: Y*

 *Spanish*

*Cultural Competency: N*

HECTOR M TORRES

 150 VALPRED A RD  
SAN MARCOS, CA 92069

 *Phone: (760) 736-6767*

*Fax: (760) 736-6744*

 *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*

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# I. 精神健康名录

restriction

American Sign Language (ASL): License Number: A166646

N

 Accessibility: CONTACT PROVIDER


## SAN YSIDRO

### BALTRUS, JUSTINEANN

Provider Gender: Female

License Number: MFC132018

NPI: 1285040709


 Provider English Spoken: Y

 Tagalog

Cultural Competency: N

JUSTINEANN A BALTRUS

 1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 600-4870

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 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

 Spanish


Cultural Competency: N

ANN E CRAWFORD-DAY

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER


 Hours: M-F 8AM-8PM  
SA 8AM-2PM

### DEPAOLO, AMANDA

Provider Gender: Female

License Number: LCS99056

NPI: 1215420138


 Provider English Spoken: Y

Cultural Competency: N

AMANDA L DEPAOLO

 4004 BEYER BLVD

SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish


TDD: U


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

 Hours: M-F 8AM-5PM

### FONTANA, LOUIS

Provider Gender: Male

License Number: G49072

NPI: 1780734343


 Provider English Spoken: Y

 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

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# I. 精神健康名录

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


 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

 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

## **JAMES, CHRISTINE**

Provider Gender: Female


License Number: 20A13931


NPI: 1679834022

 Provider English Spoken: Y

Cultural Competency: N

CHRISTINE E JAMES

 1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100

Fax: (619) 785-3384

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y


TDD: U

Min/Max Age: 18\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-F 8AM-5PM

## **JENNINGS, AMY**

Provider Gender: Female

License Number: LCS100075


NPI: 1609549161

 Provider English Spoken: Y

Cultural Competency: N

AMY E JENNINGS

 4004 BEYER BLVD  
SAN YSIDRO, CA 92173

 Phone: (619) 662-4100


Fax: (619) 205-6305

 After Hours Phone: (619)  
662-4100

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

 Site Language(s) Spoken:  
Spanish

TDD: U

Min/Max Age: 0\None

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# I. 精神健康名录

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: M-F 8AM-8PM SA 8AM-2PM*

## **JIMENEZ, NANCY**

*Provider Gender: Female*


*License Number: MFC141209*

*NPI: 1568023596*

 *Provider English Spoken: Y*  
*Cultural Competency: N*

**NANCY JIMENEZ**

 1666 PRECISION PARK LN  
SAN YSIDRO, CA 92173

 *Phone: (619) 662-4100*


*Fax: (619) 785-3384*

 *After Hours Phone: (619) 662-4100*

 *Website: N/A*

*Accepting New Patients: Yes*

*Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*


*TDD: U*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*



 *Hours: M-F 8AM-5PM*

## **LOPEZ, MARIBEL**

*Provider Gender: Female*


*License Number: LCS86171*


*NPI: 1669180600*

 *Provider English Spoken: Y*  
 *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**

### **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*

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# I. 精神健康名录

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM

## VALLEY CENTER

### PLASCENCIA, CINDY

Provider Gender: Female

License Number: MFC113536

NPI: 1952723736

Provider English Spoken: Y

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

#### ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M 8AM-5PM  
TU 10:30AM-7:30PM  
W-F 8AM-5PM

#### ACOSTA, AZUCENA

Provider Gender: Female

License Number: LCS98304

NPI: 1255937496

Provider English Spoken: Y

Spanish

Cultural Competency: N

AZUCENA ACOSTA

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-2PM  
F 8AM-5PM  
SA 9AM-6PM

### BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y

Cultural Competency: N

JENNIFER L BELL

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

Accepting New Patients: Yes

Site English Spoken: Y

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

1000 VALE TERRACE DR VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Chinese, Farsi, Estonian, Vietnamese, Hindi, Tagalog, French, Korean,

Marathi, Spanish, Telugu

TDD: U

Min/Max Age: 5\80

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-F 8AM-5PM SA 9AM-4PM

## BELL, JENNIFER

Provider Gender: Female

License Number: 20A20702

NPI: 1154614956

Provider English Spoken: Y Cultural Competency: N

JENNIFER L BELL

134 GRAPEVINE RD VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

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

## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

134 GRAPEVINE RD VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Hours: M-TH 8AM-7PM F 8AM-5PM SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

NPI: 1932359445

Provider English Spoken: Y

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-7PM  
F 8AM-5PM

SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Chinese, Korean, Marathi,

French, Estonian, Telugu,

Farsi, Vietnamese, Hindi,

Spanish, Tagalog

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-7PM  
F 8AM-5PM

SA 9AM-4PM

## CHRISTIANSON, WARREN

Provider Gender: Male

License Number: 20A9664

NPI: 1932359445

Provider English Spoken: Y

Spanish

Cultural Competency: N

WARREN R CHRISTIANSON II

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Chinese, Korean, Marathi,  
French, Estonian, Telugu,  
Farsi, Vietnamese, Hindi,  
Spanish, Tagalog

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 8AM-7PM  
F 8AM-5PM

SA 9AM-4PM

## CRUZ, VANESSA

Provider Gender: Female

License Number: LCS87166

NPI: 1285170662

Provider English Spoken: Y

Cultural Competency: N

VANESSA Y CRUZ

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

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,

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

*Spanish, Tagalog, Telugu*  
TDD: U  
Min/Max Age: 4\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-TU 8AM-8PM  
W 9AM-7PM  
TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

## **CRUZ, VANESSA**

Provider Gender: Female  
License Number: LCS87166  
NPI: 1285170662  
📄 Provider English Spoken: Y  
Cultural Competency: N  
VANESSA Y CRUZ  
📍 1000 VALE TERRACE DR  
VISTA, CA 92084  
☎ Phone: (760) 631-5000  
Fax: (760) 414-3892  
📞 After Hours Phone: (760) 631-5000  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
📄 Site Languages(s) Spoken: Vietnamese, Chinese, Estonian, Farsi, French, Hindi, Korean, Marathi, Spanish, Tagalog, Telugu  
TDD: U  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-TU 8AM-8PM  
W 9AM-7PM  
TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

## **CRUZ, VANESSA**

Provider Gender: Female  
License Number: LCS87166  
NPI: 1285170662  
📄 Provider English Spoken: Y  
Cultural Competency: N  
VANESSA Y CRUZ  
📍 134 GRAPEVINE RD  
VISTA, CA 92083  
☎ Phone: (760) 631-5000  
Fax: (760) 414-3892  
📞 After Hours Phone: (760) 631-5000  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 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  
📍 134 GRAPEVINE RD  
VISTA, CA 92083  
☎ Phone: (760) 631-5000  
Fax: (760) 414-3892  
📞 After Hours Phone: (760) 631-5000  
🌐 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 4\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
🕒 Hours: M-TH 9AM-7PM  
F 9AM-5PM  
SA 9AM-4PM

## **DOUGHERTY, CHRISTINE**

Provider Gender: Female  
License Number: LCS26686  
NPI: 1003194960  
📄 Provider English Spoken: Y  
Cultural Competency: N

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# I. 精神健康名录

CHRISTINE A DOUGHERTY

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

**DOUGHERTY, CHRISTINE**

Provider Gender: Female

License Number: LCS26686

NPI: 1003194960

Provider English Spoken: Y

Cultural Competency: N

CHRISTINE A DOUGHERTY

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Chinese, Estonian, Farsi,

French, Hindi, Korean,  
Marathi, Spanish, Telugu,  
Vietnamese, Tagalog

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-TH 9AM-8PM  
F 9AM-5PM  
SA 9AM-4PM

**MENDEZ, ADRIANA**

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

Provider English Spoken: Y

Spanish

Cultural Competency: N

ADRIANA J MENDEZ

1000 VALE TERRACE DR  
VISTA, CA 92084

Phone: (760) 631-5000

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Hours: M-F 8AM-8PM  
SA 9AM-4PM

**MENDEZ, ADRIANA**

Provider Gender: Female

License Number: LCS86435

NPI: 1356777361

Provider English Spoken: Y

Spanish

Cultural Competency: N

ADRIANA J MENDEZ

134 GRAPEVINE RD  
VISTA, CA 92083

Phone: (760) 631-5000

Fax: (760) 414-3892

After Hours Phone: (760)  
631-5000

Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

**MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

Provider English Spoken: Y  
Cultural Competency: N

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# I. 精神健康名录

**GRETA R MEYERHOF**

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

**MEYERHOF, GRETA**

Provider Gender: Female

License Number: MFC32299

NPI: 1487196333

🗨 Provider English Spoken: Y

Cultural Competency: N

**GRETA R MEYERHOF**

📍 134 GRAPEVINE RD  
VISTA, CA 92083

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)  
631-5000

🌐 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

**NEVILLE, MARGARET**

Provider Gender: Female

License Number: LCS82407

NPI: 1073682407

🗨 Provider English Spoken: Y

Cultural Competency: N

**MARGARET R NEVILLE**

📍 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**

📍 1000 VALE TERRACE DR  
VISTA, CA 92084

☎ Phone: (760) 631-5000

Fax: (760) 414-3892

🕒 After Hours Phone: (760)

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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# I. 精神健康名录

631-5000  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 18\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N  
Accessibility: CONTACT PROVIDER  
Hours: M 8AM-5PM  
TU 10AM-7PM  
W-F 8AM-5PM  
SA 9AM-4PM

## **PATEL, MITESH**

Provider Gender: Male  
License Number: A181164  
NPI: 1568880292  
Provider English Spoken: Y  
Cultural Competency: N

MITESH K PATEL

134 GRAPEVINE RD  
VISTA, CA 92083  
Phone: (760) 631-5000  
Fax: (760) 414-3892  
After Hours Phone: (760) 631-5000  
Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 18\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): License Number: LCS97093  
N  
Accessibility: CONTACT PROVIDER  
Hours: M 8AM-5PM  
TU 10AM-7PM  
W-F 8AM-5PM  
SA 9AM-4PM

## **SANCHEZ, ADRIANA**

Provider Gender: Female  
License Number: LCS97093  
NPI: 1609450451  
Provider English Spoken: Y  
Spanish  
Cultural Competency: N

ADRIANA SANCHEZ

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

## **SANCHEZ, ADRIANA**

Provider Gender: Female

Provider English Spoken: Y  
Spanish  
Cultural Competency: N  
ADRIANA SANCHEZ  
134 GRAPEVINE RD  
VISTA, CA 92083  
Phone: (760) 631-5000  
Fax: (760) 414-3892

After Hours Phone: (760) 631-5000

Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

## **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。







# I. 精神健康名录



 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): NPI: 1902070857  
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

 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
SONYA L SMITH



 1000 VALE TERRACE DR  
VISTA, CA 92084  
 Phone: (760) 631-5000  
 After Hours Phone: (760)  
631-5000

 Website: N/A  
Accepting New Patients: Yes  
Site English Spoken: Y  
TDD: U  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction



American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER

## **SMITH, SONYA**

Provider Gender: Female  
License Number: LCS82598  
NPI: 1902070857

 Provider English Spoken: Y  
 Spanish  
Cultural Competency: N  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

# I. 精神健康名录

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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

## WILSON, CARLENE


Provider Gender: Female


License Number: LCS74685

NPI: 1508327081

 Provider English Spoken: Y  
Cultural Competency: N

CARLENE WILSON

 1000 VALE TERRACE DR  
VISTA, CA 92084

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes


Site English Spoken: Y


TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

 Hours: M-TH 8AM-8PM  
F 8AM-5PM  
SA 9AM-4PM

## WILSON, CARLENE

Provider Gender: Female


License Number: LCS74685


NPI: 1508327081

 Provider English Spoken: Y  
Cultural Competency: N

CARLENE WILSON

 134 GRAPEVINE RD  
VISTA, CA 92083

 Phone: (760) 631-5000  
Fax: (760) 414-3892

 After Hours Phone: (760)  
631-5000

 Website: N/A

Accepting New Patients: Yes

Site English Spoken: Y

TDD: U

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### ALPINE

#### AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

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

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

<p>N   <b>Accessibility: CONTACT PROVIDER</b>                      Public transportation (within 1/2 mile from Site): 1U   <b>Hours: M 9AM-5PM                      TU 10AM-6PM                      W 9AM-5PM                      TH 8AM-5PM                      F 9AM-4PM</b></p>	<p><b>W 9AM-5PM                      TH 8AM-5PM                      F 9AM-4PM</b></p>	<p><b>NPI: 1760473797</b>  <b>Provider English Spoken: Y</b>   <b>Spanish</b>  <b>Cultural Competency: Y</b>  <b>ACUITY EYE GROUP</b>   <b>1620 ALPINE BLVD STE 117                      ALPINE, CA 91901</b>   <b>Phone: (619) 445-2687</b>  <b>Fax: (619) 445-0801</b>   <b>After Hours Phone: (619)                      445-2687</b></p>
<p><b>DYER, SHARON, OD</b>  <b>Provider Gender: Female</b>  <b>License Number: 33450</b>  <b>NPI: 1063866887</b>  <b>Provider English Spoken: Y</b>  <b>Cultural Competency: Y</b>  <b>ACUITY EYE GROUP</b>   <b>1620 ALPINE BLVD STE 117                      ALPINE, CA 91901</b>   <b>Phone: (619) 445-2687</b>  <b>Fax: (619) 445-0801</b>   <b>After Hours Phone: (619)                      445-2687</b>  <b>Accepting New Patients: Yes</b>   <b>Site English Spoken: Y</b>  <b>Min/Max Age: 0\None</b>  <b>Gender Restriction: No Gender restriction</b>  <b>American Sign Language (ASL):</b></p>	<p><b>KALBAKJI, NATALY, OD</b>  <b>Provider Gender: Female</b>  <b>License Number: 34943</b>  <b>NPI: 1700556438</b>  <b>Provider English Spoken: Y</b>   <b>Arabic</b>  <b>Cultural Competency: Y</b>  <b>ACUITY EYE GROUP</b>   <b>1620 ALPINE BLVD STE 117                      ALPINE, CA 91901</b>   <b>Phone: (619) 445-2687</b>  <b>Fax: (619) 445-0801</b>   <b>After Hours Phone: (619)                      445-2687</b>  <b>Accepting New Patients: Yes</b>   <b>Site English Spoken: Y</b>  <b>Min/Max Age: 0\None</b>  <b>Gender Restriction: No Gender restriction</b>  <b>American Sign Language (ASL):</b></p>	<p><b>Accepting New Patients: Yes</b>   <b>Site English Spoken: Y</b>  <b>Min/Max Age: 0\None</b>  <b>Gender Restriction: No Gender restriction</b>  <b>American Sign Language (ASL):</b>                      N   <b>Accessibility: CONTACT PROVIDER</b>                      Public transportation (within 1/2 mile from Site): 1U   <b>Hours: M 9AM-5PM                      TU 10AM-6PM                      W 9AM-5PM                      TH 8AM-5PM                      F 9AM-4PM</b></p>
<p>N   <b>Accessibility: CONTACT PROVIDER</b>                      Public transportation (within 1/2 mile from Site): 1U   <b>Hours: M 9AM-5PM                      TU 10AM-6PM</b></p>	<p><b>KATZMAN, BARRY, MD</b>  <b>Provider Gender: Male</b>  <b>License Number: A34834</b></p>	<p><b>KHALIL, VADY, OD</b>  <b>Provider Gender: Male</b>  <b>License Number: 35137</b>  <b>NPI: 1275263584</b>  <b>Provider English Spoken: Y</b>   <b>Arabic</b>  <b>Cultural Competency: Y</b>  <b>ACUITY EYE GROUP</b>   <b>1620 ALPINE BLVD STE 117</b></p>

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

ALPINE, CA 91901  
☎ Phone: (619) 445-2687  
Fax: (619) 445-0801  
🕒 After Hours Phone: (619) 445-2687  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **KHIEU, TINA, OD**

Provider Gender: Female  
License Number: 34777  
NPI: 1962031617  
Provider English Spoken: Y  
Cultural Competency: Y  
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  
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

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## J. 眼科提供者名录 - 眼科和视力服务

### **MORRISON REYES, JOSHUA, MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

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

Gujarati, Hindi, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **PATEL, GITANE, MD**

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

1620 ALPINE BLVD STE 117  
ALPINE, CA 91901

Phone: (619) 445-2687

Fax: (619) 445-0801

After Hours Phone: (619)  
445-2687

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### **PRABHU, SUJATA, MD**

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-5PM  
TU 10AM-6PM  
W 9AM-5PM  
TH 8AM-5PM  
F 9AM-4PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

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

 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

 Spanish

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

EYECARE OF BONITA

4502 BONITA RD  
BONITA, CA 91902

Phone: (619) 479-7334

Fax: (619) 475-3456

After Hours Phone: (619)  
479-7334

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M 8AM-6:30PM  
W 8AM-6PM  
TH 12:30AM-6PM  
F 8AM-6PM  
SA 9AM-2PM

### CARLSBAD

**HO, TRAM, OD**

Provider Gender: Female

License Number: 13485

NPI: 1245464460

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

EYE STYLE OPTOMETRY

5814 VAN ALLEN WAY STE

146

CARLSBAD, CA 92008

Phone: (760) 606-2020

After Hours Phone: (760)  
606-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: TU 9AM-5PM  
W 10AM-6PM  
TH 9AM-5PM  
F 8AM-4PM  
SA 9AM-3PM

### CHULA VISTA

**CASTILLEJOS, MARIA, MD**

Provider Gender: Female

License Number: A37652

NPI: 1043395098

Provider English Spoken: Y

Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE  
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)  
422-1471

Accepting New Patients: Yes

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, DAVID, MD**

Provider Gender: Male

License Number: A44482

NPI: 1558446401

Provider English Spoken: Y

French, Portuguese,  
Spanish, Tagalog

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE  
MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619)  
422-1471

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

- Site English Spoken: Y  
 Site Languages(s) Spoken: French, Spanish, Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TU 9AM-6PM  
 W 11AM-6PM  
 TH-F 9AM-6PM
- 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
- CHISHOLM, KAREN, OD**  
 License Number: 35450  
 NPI: 1568155190  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 OTAY RANCH EYEWORKS OPTOMETRY  
 1741 EASTLAKE PKWY STE 101  
 CHULA VISTA, CA 91915  
 Phone: (619) 421-6600  
 Fax: (619) 421-6006  
 After Hours Phone: (619) 421-6600  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Arabic, Hindi, Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within
- American Sign Language (ASL): 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  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **KALRA, ANKUR, OD**

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

 Hindi


Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915


 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken: Arabic, Hindi, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### **KEDDINGTON, JOAN, OD**

Provider Gender: Female

License Number: 6263

NPI: 1992872691

Provider English Spoken: Y

 Spanish


Cultural Competency: Y

OTAY RANCH EYEWORKS


OPTOMETRY

 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915


 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes


 Site English Spoken: Y

 Site Languages(s) Spoken: Arabic, Hindi, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### **KING, MARY, OD**

Provider Gender: Female

License Number: 13711


NPI: 1578792107

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

OTAY RANCH EYEWORKS  
OPTOMETRY

 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915


 Phone: (619) 421-6600

Fax: (619) 421-6006

 After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Arabic, Hindi, Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### **MASCARENO, EFRAIN, OD**

Provider Gender: Male

License Number: 10906


NPI: 1457507279

Provider English Spoken: Y


Cultural Competency: Y

CLEAR VISION OPTOMETRY

DR MASCARENO

 440 4TH AVE

CHULA VISTA, CA 91910

 Phone: (619) 427-2020

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Fax: (866) 254-5707

☎ After Hours Phone: (619) 427-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH 9AM-6PM  
F 9AM-5PM

### NGUYEN, THERESA, OD

Provider Gender: Female

License Number: 35530TLG

NPI: 1609555713

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS OPTOMETRY

📍 1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

☎ Phone: (619) 421-6600

Fax: (619) 421-6006

☎ After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### NGUYEN, TRACY, OD

Provider Gender: Female

License Number: 10859

NPI: 1265596621

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

ESSENTIAL EYECARE OPTOMETRY

📍 345 F ST STE 240

CHULA VISTA, CA 91910

☎ Phone: (858) 467-0655

Fax: (619) 425-9797

☎ After Hours Phone: (858) 467-0655

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TH 10AM-3PM

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **PLUCINIK, STANLEY, OD**

Provider Gender: Male

License Number: 35255

NPI: 1124751417

Provider English Spoken: Y

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE

MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619) 422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: French, Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM

TU 7AM-5PM

W-F 8AM-5PM

### **SCOVILL, ALEXANDRA, OD**

Provider Gender: Female

License Number: 33711

NPI: 1184146094

Provider English Spoken: Y

Spanish

Cultural Competency: Y

CASTILLEJOS EYE INSTITUTE

MED GROUP

342 F ST

CHULA VISTA, CA 91910

Phone: (619) 422-1471

Fax: (619) 271-7044

After Hours Phone: (619) 422-1471

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: French, Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM

TU 7AM-5PM

W-F 8AM-5PM

### **SOLIS, KEVIN, OD**

Provider Gender: Male

License Number: 10420

NPI: 1538362116

Provider English Spoken: Y

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619) 421-6600

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1U

Hours: SU 10AM-4PM

M-F 9AM-7PM

SA 9AM-5PM

### **TOUBIA, ELIAS, OD**

Provider Gender: Male

License Number: 33758

NPI: 1740701481

Provider English Spoken: Y

Arabic

Cultural Competency: Y

OTAY RANCH EYEWORKS

OPTOMETRY

1741 EASTLAKE PKWY STE 101

CHULA VISTA, CA 91915

Phone: (619) 421-6600

Fax: (619) 421-6006

After Hours Phone: (619) 421-6600

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: SU 10AM-4PM  
M-F 9AM-7PM  
SA 9AM-5PM

### VILLA, ANGELICA, OD

Provider Gender: Female

License Number: 10561

NPI: 1962544965

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VILLA OPTOMETRY INC

523 TELEGRAPH CANYON RD

CHULA VISTA, CA 91910

Phone: (619) 482-2020

Fax: (619) 482-2671

After Hours Phone: (619) 482-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM  
W 11AM-6PM  
TH-F 9AM-6PM

### CORONADO

#### COCKERHAM, KIMBERLY, MD

Provider Gender: Female

License Number: G86885

NPI: 1366493629

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

801 ORANGE AVE STE 204 CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619) 437-4406

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-4:30PM  
TU 9AM-3PM  
W-TH 9AM-4:30PM

#### GRAY, IGA, MD

Provider Gender: Female

License Number: A174875

NPI: 1033538350

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES MED CLINIC INC

801 ORANGE AVE STE 204 CORONADO, CA 92118

Phone: (619) 437-4406

Fax: (619) 522-7983

After Hours Phone: (619) 437-4406

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 9AM-4:30PM  
TU 9AM-3PM  
W-TH 9AM-4:30PM

#### KATZMAN, LEE, MD

Provider Gender: Male

License Number: A135673

NPI: 1912297284

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y  
Cultural Competency: Y  
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

Site 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

W-TH 9AM-4:30PM

### EL CAJON

#### AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650


Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200 EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

#### ASIS, STEPHANIE, OD

Provider Gender: Female

License Number: 34013


NPI: 1902383540

Provider English Spoken: Y


Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200 EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

#### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530


NPI: 1982232146

Provider English Spoken: Y


Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200 EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

#### BINDER, NICHOLAS, MD

Provider Gender: Male

License Number: A124698


NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200 EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):


N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 Hours: M-F 8:30AM-6PM

### **BUTLER, KIM, OD**

Provider Gender: Male

License Number: 6405

NPI: 1467444844


Provider English Spoken: Y

Cultural Competency: Y

KIM J BUTLER OD

 1273 BROADWAY

EL CAJON, CA 92021

 Phone: (619) 579-2345

Fax: (619) 579-0876

 After Hours Phone: (619)  
579-2345

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 9AM-5PM  
SA 9AM-12AM

### **CHAN, KWOK FUNG, OD**

Provider Gender: Male

License Number: 35087

NPI: 1407508385


Provider English Spoken: Y

Cultural Competency: Y


WERNER OPTOMETRY

 2650 JAMACHA RD STE 155

EL CAJON, CA 92019


 Phone: (619) 670-6296

Fax: (619) 670-8852

 After Hours Phone: (619)  
670-6296

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M 9AM-5PM  
TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### **DEAN, MOENA, OD**

Provider Gender: Female

License Number: 33955


NPI: 1265927578

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **DYER, SHARON, OD**

Provider Gender: Female

License Number: 33450


NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP


 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N


 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

 Hours: M-F 8:30AM-6PM

### HAMOUIE, JUDY, OD

Provider Gender: Female

License Number: 34984

NPI: 1518638287


Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y


 Korean

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618


Provider English Spoken: Y

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400


Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### KATZMAN, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400


Accepting New Patients: Yes

 Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y


Arabic

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617


Provider English Spoken: Y

Cultural Competency: Y


RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **MARR, RYAN, OD**

Provider Gender: Male

License Number: 35302

NPI: 1235857525


Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF

CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **MCMURREN, BRITTANY, OD**

Provider Gender: Female

License Number: 14824


NPI: 1104243815

Provider English Spoken: Y

Cultural Competency: Y

WERNER OPTOMETRY

 2650 JAMACHA RD STE 155  
EL CAJON, CA 92019

 Phone: (619) 670-6296

Fax: (619) 670-8852

 After Hours Phone: (619)  
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Italian, Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M 9AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### **PANDYA, BHUMIKA, OD**

Provider Gender: Female

License Number: 35025

NPI: 1063182822


Provider English Spoken: Y

Hindi

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239


 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **PATEL, GITANE, MD**

Provider Gender: Male

License Number: A108603


NPI: 1710171434

Provider English Spoken: Y


Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **PATEL, SARJAN, MD**

Provider Gender: Male

License Number: A114976


NPI: 1316199326

Provider English Spoken: Y


Gujarati, Hindi, Spanish  
Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239


 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes


Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### **SCOTT, JEFFREY, OD**

Provider Gender: Male

License Number: 34978


NPI: 1568813434

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

 Phone: (619) 440-5400

Fax: (619) 440-0239

 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

📄 Vietnamese

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177

NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200 EL CAJON, CA 92020

☎ Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619) 440-5400

Accepting New Patients: Yes

📄 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### WERNER, REX, OD

Provider Gender: Male

License Number: 9378

NPI: 1891760716

Provider English Spoken: Y

📄 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 Language(s) Spoken: Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM  
TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### WERNER, R AARON, OD

Provider Gender: Male

License Number: 13478

NPI: 1821259458

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WERNER OPTOMETRY

📍 2650 JAMACHA RD STE 155  
EL CAJON, CA 92019

📞 Phone: (619) 670-6296

Fax: (619) 670-8852

🕒 After Hours Phone: (619)  
670-6296

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken:  
Italian, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M 9AM-5PM  
TU 10AM-5PM  
W-TH 9AM-5PM  
F 8AM-2PM

### ZAIDI, NOORINA, OD

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200  
EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200

EL CAJON, CA 92020

📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 8:30AM-6PM

### ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

RETINA INSTITUTE OF  
CALIFORNIA MEDICAL GROUP

📍 300 S PIERCE ST STE 200  
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📞 Phone: (619) 440-5400

Fax: (619) 440-0239

🕒 After Hours Phone: (619)  
440-5400

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

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## J. 眼科提供者名录 - 眼科和视力服务

American Sign Language (ASL): **AOTO, KIM, OD**

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-6PM

### ENCINITAS

**ADAMS, MONA, OD**

Provider Gender: Female

License Number: 14457


NPI: 1942564521

Provider English Spoken: Y


Cultural Competency: Y

RADY CHILDRENS HOSPITAL  
ENCINITAS

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)  
309-7702


Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

Provider Gender: Female

License Number: 14524


NPI: 1780935650

Provider English Spoken: Y


Spanish, Vietnamese  
Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

 Phone: (760) 943-7141

Fax: (760) 943-0371

 After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

**BANSAL, PREETI, MD**

Provider Gender: Female

License Number: A90890

NPI: 1871664631

Provider English Spoken: Y


Spanish

Cultural Competency: Y


RADY CHILDRENS HOSPITAL

ENCINITAS

 477 N EL CAMINO REAL  
STE D302  
ENCINITAS, CA 92024

 Phone: (858) 309-7702

Fax: (858) 966-7403

 After Hours Phone: (858)  
309-7702


Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

**BAUMANN, DANIELA, OD**

Provider Gender: Female

License Number: 34530


NPI: 1982232146

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024

 Phone: (760) 943-7141

Fax: (760) 943-0371

 After Hours Phone: (760)  
943-7141



Accepting New Patients: Yes

Site English Spoken: Y


Site Languages(s) Spoken:






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## J. 眼科提供者名录 - 眼科和视力服务




*Spanish*  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

**BHATIA, SHAGUN, MD**  
 Provider Gender: Female  
 License Number: A154902  
 NPI: 1104237353  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 RADY CHILDRENS HOSPITAL  
 ENCINITAS  
 477 N EL CAMINO REAL  
 STE D302  
 ENCINITAS, CA 92024  
 Phone: (858) 309-7702  
 Fax: (858) 966-7403  
 After Hours Phone: (858) 309-7702  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within

1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM




**CHANG, TOM, MD**  
 Provider Gender: Male  
 License Number: A69909  
 NPI: 1609848969  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM  
**CHIU, STEPHAN, MD**  
 Provider Gender: Male  
 License Number: A172634  
 NPI: 1053846956  
 Provider English Spoken: Y  
 Cultural Competency: Y

ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

**DEAN, MOENA, OD**  
 Provider Gender: Female  
 License Number: 33955  
 NPI: 1265927578  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141  
 Accepting New Patients: Yes  
 Site English Spoken: Y


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## J. 眼科提供者名录 - 眼科和视力服务








 *Site Languages(s) Spoken: Spanish*  
*Public transportation (within 1/2 mile from Site): 1T*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-5PM*

### **DYER, SHARON, OD**

*Provider Gender: Female*  
*License Number: 33450*  
*NPI: 1063866887*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**ACUITY EYE GROUP**  
 320 SANTA FE DR STE 104  
 ENCINITAS, CA 92024  
 *Phone: (760) 943-7141*  
*Fax: (760) 943-0371*  
 *After Hours Phone: (760) 943-7141*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-5PM*








*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*  
 *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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male  
 License Number: 35137  
 NPI: 1275263584  
 Provider English Spoken: Y  
 Arabic  
 Cultural Competency: Y  
 ACUITY EYE GROUP

320 SANTA FE DR STE 104 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL):

N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **KHIEU, TINA, OD**

Provider Gender: Female  
 License Number: 34777  
 NPI: 1962031617  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

320 SANTA FE DR STE 104 ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
 Fax: (760) 943-0371  
 After Hours Phone: (760) 943-7141

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### **LEE, JASON, OD**

Provider Gender: Male

License Number: 14881  
 NPI: 1679985584  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 RADY CHILDRENS HOSPITAL ENCINITAS

477 N EL CAMINO REAL STE D302 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

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## J. 眼科提供者名录 - 眼科和视力服务

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

☐ 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

☐ German, Spanish Cultural Competency: Y

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## J. 眼科提供者名录 - 眼科和视力服务

### 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

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## J. 眼科提供者名录 - 眼科和视力服务



 Spanish  
Cultural Competency: Y  
ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
Fax: (760) 943-0371  
 After Hours Phone: (760)  
943-7141  
Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM



### ZHAO, TAILUN, MD



Provider Gender: Male  
License Number: C186414  
NPI: 1952659203  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
Fax: (760) 943-0371  
 After Hours Phone: (760)  
943-7141

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### ZVANUT, DONALD, OD

Provider Gender: Male  
License Number: 8642  
NPI: 1336211804  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP  
 320 SANTA FE DR STE 104  
ENCINITAS, CA 92024  
 Phone: (760) 943-7141  
Fax: (760) 943-0371  
 After Hours Phone: (760)  
943-7141  
Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N




 Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

## 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

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## J. 眼科提供者名录 - 眼科和视力服务

### **ASIS, STEPHANIE, OD**

Provider Gender: Female

License Number: 34013

NPI: 1902383540

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### **BANDAK, DIANA, OD**

Provider Gender: Female

License Number: 34850

NPI: 1235805318

Provider English Spoken: Y

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

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





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## J. 眼科提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-5PM*

### **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 Language(s) Spoken: Spanish*  
*Min/Max Age: 0\None*

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## J. 眼科提供者名录 - 眼科和视力服务

Gender Restriction: No Gender restriction  Hours: M-F 8AM-5PM

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-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

### CHAU, VIVIAN, OD

Provider Gender: Female

License Number: 35427

NPI: 1558052951

Provider English Spoken: Y


 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


 Vietnamese Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

 2125 CITRACADO PKWY STE 200

ESCONDIDO, CA 92029

 Phone: (760) 755-7600

Fax: (760) 755-7699

 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8:30AM-4:30PM

### GOLDSTONE, ADAM, OD

Provider Gender: Male

License Number: 11051

NPI: 1316972995


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 700 W EL NORTE PKWY STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### HAMOUIE, JUDY, OD

Provider Gender: Female  
 License Number: 34984  
 NPI: 1518638287  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

700 W EL NORTE PKWY STE 200  
 ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
 Fax: (760) 743-5879

After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender

restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### HSU, CHRISTOPHER, MD

Provider Gender: Male  
 License Number: A65973  
 NPI: 1336167618  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

700 W EL NORTE PKWY STE 200  
 ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
 Fax: (760) 743-5879

After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male  
 License Number: G76091  
 NPI: 1851349195  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

700 W EL NORTE PKWY STE 200  
 ESCONDIDO, CA 92026  
 Phone: (760) 743-5872  
 Fax: (760) 743-5879

After Hours Phone: (760) 743-5872  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

### KALBAKJI, NATALY, OD

Provider Gender: Female  
 License Number: 34943  
 NPI: 1700556438  
 Provider English Spoken: Y  
 Arabic  
 Cultural Competency: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。




## J. 眼科提供者名录 - 眼科和视力服务

### ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### KARAPETIAN, ELENA, OD

Provider Gender: Female

License Number: 34514

NPI: 1184250417


Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y


Arabic

Cultural Competency: Y

### ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617


Provider English Spoken: Y

Cultural Competency: Y


### ACUITY EYE GROUP

 700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

 Phone: (760) 743-5872

Fax: (760) 743-5879

 After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **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

Site 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

### **LE, TAM, OD**

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Site 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-TH 9AM-5:30PM  
F 9AM-1PM*

### LEE, JASON, OD



*Provider Gender: Male*  
*License Number: 14881*  
*NPI: 1679985584*  
*Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: Y*

### RADY CHILDRENS

#### SPECIALISTS

 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029  
 *Phone: (760) 755-7600*  
*Fax: (760) 755-7699*  
 *After Hours Phone: (760)  
755-7600*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
restriction*




*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F  
8:30AM-4:30PM*



### MARR, RYAN, OD

*Provider Gender: Male*  
*License Number: 35302*  
*NPI: 1235857525*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*


### ACUITY EYE GROUP


 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026  
 *Phone: (760) 743-5872*  
*Fax: (760) 743-5879*  
 *After Hours Phone: (760)  
743-5872*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
 *Site Languages(s) Spoken:  
Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*

 *Hours: M-F 8AM-5PM*

### MCGRAW, JOSEPH, MD


*Provider Gender: Male*  
*License Number: A155228*  
*NPI: 1588624852*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*

### ACUITY EYE GROUP

 700 W EL NORTE PKWY

STE 200



ESCONDIDO, CA 92026

 *Phone: (760) 743-5872*

*Fax: (760) 743-5879*

 *After Hours Phone: (760)  
743-5872*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
 *Site Languages(s) Spoken:  
Spanish*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

 *Hours: M-F 8AM-5PM*

### MOLL, ANGELA, MD

*Provider Gender: Female*  
*License Number: A105472*  
*NPI: 1861648602*


*Provider English Spoken: Y*  
*Cultural Competency: Y*

### RADY CHILDRENS

#### SPECIALISTS

 2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

 *Phone: (760) 755-7600*

*Fax: (760) 755-7699*

 *After Hours Phone: (760)  
755-7600*

*Accepting New Patients: Yes*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⌚ Hours: M-F 8:30AM-4:30PM

### MORRISON REYES, JOSHUA, MD

Provider Gender: Male  
License Number: A125435  
NPI: 1235366782

Provider English Spoken: Y  
 Indonesian, Spanish  
Cultural Competency: Y

#### ACUITY EYE GROUP

📍 700 W EL NORTE PKWY  
STE 200  
ESCONDIDO, CA 92026

☎ Phone: (760) 743-5872  
Fax: (760) 743-5879

📞 After Hours Phone: (760) 743-5872

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Language(s) Spoken: Spanish

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
⌚ Hours: M-F 8AM-5PM

### MOVAGHAR, MANSOOR, MD

Provider Gender: Male  
License Number: A100897  
NPI: 1497792220

Provider English Spoken: Y  
Cultural Competency: Y  
RADY CHILDRENS  
SPECIALISTS

📍 2125 CITRACADO PKWY  
STE 200  
ESCONDIDO, CA 92029

☎ Phone: (760) 755-7600  
Fax: (760) 755-7699

📞 After Hours Phone: (760) 755-7600

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T

⌚ Hours: M-F 8:30AM-4:30PM

### O HALLORAN, HENRY, MD

Provider Gender: Male  
License Number: A73282  
NPI: 1235287947

Provider English Spoken: Y

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

Gujarati  
Cultural Competency: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

### 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

Gujarati, Hindi, Spanish  
Cultural Competency: Y

#### ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)

743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### PATEL, GITANE, MD

Provider Gender: Male

License Number: A108603

NPI: 1710171434

Provider English Spoken: Y

Cultural Competency: Y

#### ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

Spanish

Cultural Competency: Y

#### ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **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

Vietnamese

Cultural Competency: Y

### INSIGHT VISION OPTOMETRY

2419 E VALLEY PKWY  
ESCONDIDO, CA 92027

Phone: (760) 738-9931

Fax: (760) 888-2181

After Hours Phone: (760)  
738-9931

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 9:30AM-5PM  
TH 10AM-6PM  
F 9:30AM-5PM

### **TON-NU, MY LINH, OD**

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

700 W EL NORTE PKWY  
STE 200

ESCONDIDO, CA 92026

Phone: (760) 743-5872

Fax: (760) 743-5879

After Hours Phone: (760)  
743-5872

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### **TRAN, ALEXANDER, OD**

Provider Gender: Male

License Number: 14136

NPI: 1902414790

Provider English Spoken: Y

Cultural Competency: Y

### RADY CHILDRENS

### SPECIALISTS

2125 CITRACADO PKWY  
STE 200

ESCONDIDO, CA 92029

Phone: (760) 755-7600

Fax: (760) 755-7699

After Hours Phone: (760)  
755-7600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None



Gender Restriction: No Gender  
restriction

American Sign Language (ASL):





N

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## J. 眼科提供者名录 - 眼科和视力服务









 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-F 8:30AM-4:30PM*

### **VERRET, ERIC, OD**

*Provider Gender: Male*  
*License Number: 11401*  
*NPI: 1194891853*  
*Provider English Spoken: Y*  
 *French, Spanish*  
*Cultural Competency: Y*  
**ESCONDIDO EYECARE**  
 613 E GRAND AVE  
ESCONDIDO, CA 92025  
 *Phone: (760) 747-7979*  
*Fax: (760) 747-7999*  
 *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*  
 *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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 *Site Languages(s) Spoken:*  
 Spanish  
*Min/Max Age:* 0\None  
*Gender Restriction:* No Gender  
 restriction




*American Sign Language (ASL):*  
 N

 *Accessibility:* CONTACT  
 PROVIDER  
*Public transportation (within  
 1/2 mile from Site):* 1T  
 *Hours:* M-F 8AM-5PM



### ZVANUT, DONALD, OD

*Provider Gender:* Male  
*License Number:* 8642  
*NPI:* 1336211804  
*Provider English Spoken:* Y  
*Cultural Competency:* Y

### ACUITY EYE GROUP


 700 W EL NORTE PKWY  
 STE 200  
 ESCONDIDO, CA 92026  
 *Phone:* (760) 743-5872  
*Fax:* (760) 743-5879  
 *After Hours Phone:* (760)  
 743-5872

*Accepting New Patients:* Yes

 *Site English Spoken:* Y  
 *Site Languages(s) Spoken:*  
 Spanish  
*Min/Max Age:* 0\None  
*Gender Restriction:* No Gender  
 restriction

*American Sign Language (ASL):*  
 N

 *Accessibility:* CONTACT

**PROVIDER**  
*Public transportation (within  
 1/2 mile from Site):* 1T  
 *Hours:* M-F 8AM-5PM

### FALLBROOK



### ARCHIBALD, JOHN, OD

*Provider Gender:* Male  
*License Number:* 11813  
*NPI:* 1902893357  
*Provider English Spoken:* Y  
*Cultural Competency:* Y



### INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102  
 FALLBROOK, CA 92028  
 *Phone:* (760) 728-5728  
*Fax:* (760) 728-5934  
 *After Hours Phone:* (760)  
 728-5728

*Accepting New Patients:* Yes

 *Site English Spoken:* Y  
 *Site Languages(s) Spoken:*  
 Spanish  
*Min/Max Age:* 0\None  
*Gender Restriction:* No Gender  
 restriction

*American Sign Language (ASL):*  
 N


 *Accessibility:* CONTACT  
 PROVIDER  
*Public transportation (within  
 1/2 mile from Site):* 1U  
 *Hours:* M-F 8AM-5PM


### COLEMAN, BROOKE, OD

*Provider Gender:* Female  
*License Number:* 13551

*NPI:* 1700040748



*Provider English Spoken:* Y  
*Cultural Competency:* Y  
 INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102  
 FALLBROOK, CA 92028

 *Phone:* (760) 728-5728  
*Fax:* (760) 728-5934

 *After Hours Phone:* (760)  
 728-5728



*Accepting New Patients:* Yes

 *Site English Spoken:* Y  
 *Site Languages(s) Spoken:*  
 Spanish

*Min/Max Age:* 0\None

*Gender Restriction:* No Gender  
 restriction

*American Sign Language (ASL):*  
 N

 *Accessibility:* CONTACT  
 PROVIDER  
*Public transportation (within  
 1/2 mile from Site):* 1U  
 *Hours:* M-F 8AM-5PM


### CONNOR, JEFFREY, OD

*Provider Gender:* Male  
*License Number:* 33683  
*NPI:* 1063968980  
*Provider English Spoken:* Y

 *Spanish*  
*Cultural Competency:* Y

### INLAND EYE SPECIALISTS

 521 E ELDER ST STE 102  
 FALLBROOK, CA 92028

 *Phone:* (760) 728-5728  
*Fax:* (760) 728-5934

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

☎ *After Hours Phone: (760) 728-5728*  
 Accepting New Patients: Yes  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 ⌚ *Hours: M-F 8AM-5PM*

### **COOPER, MICHAEL, OD**

*Provider Gender: Male*  
*License Number: 10476*  
*NPI: 1164586244*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**INLAND EYE SPECIALISTS**  
 521 E ELDER ST STE 102 FALLBROOK, CA 92028  
 *Phone: (760) 728-5728*  
*Fax: (760) 728-5934*  
 ☎ *After Hours Phone: (760) 728-5728*  
 Accepting New Patients: Yes  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 ⌚ *Hours: M-F 8AM-5PM*

### **DUONG, CHERYL, OD**

*Provider Gender: Female*  
*License Number: 34070*  
*NPI: 1366935678*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**INLAND EYE SPECIALISTS**

521 E ELDER ST STE 102 FALLBROOK, CA 92028  
 *Phone: (760) 728-5728*  
*Fax: (760) 728-5934*  
 ☎ *After Hours Phone: (760) 728-5728*

*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

*Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 ⌚ *Hours: M-F 8AM-5PM*

**GEORGE, BRUCE, OD**  
*Provider Gender: Male*  
*License Number: 7696*  
*NPI: 1356414551*  
*Provider English Spoken: Y*  
 *Korean, Spanish*  
*Cultural Competency: Y*  
**BRUCE D GEORGE OD**

1102 S MAIN AVE FALLBROOK, CA 92028  
 *Phone: (760) 723-8417*  
*Fax: (760) 758-2063*

☎ *After Hours Phone: (760) 723-8417*  
 Accepting New Patients: Yes  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*









*Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 ⌚ *Hours: M 1PM-5PM*  
*TU-W 9AM-6PM*  
*TH-F 9AM-5PM*  
*SA 9AM-1PM*



### **GEORGE, KENDALL, OD**






*Provider Gender: Male*  
*License Number: 34270*  
*NPI: 1619529948*  
*Provider English Spoken: Y*

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## J. 眼科提供者名录 - 眼科和视力服务

 *Spanish*  
*Cultural Competency: Y*  
**BRUCE D GEORGE OD**  
 1102 S MAIN AVE  
 FALLBROOK, CA 92028  
 *Phone: (760) 723-8417*  
*Fax: (760) 758-2063*  
 *After Hours Phone: (760) 723-8417*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M 1PM-5PM*  
*TU-W 9AM-6PM*  
*TH-F 9AM-5PM*  
*SA 9AM-1PM*








**KHINDA, SUNEHA, OD**  
*Provider Gender: Female*  
*License Number: 35494*  
*NPI: 1750066726*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**INLAND EYE SPECIALISTS**  
 521 E ELDER ST STE 102  
 FALLBROOK, CA 92028  
 *Phone: (760) 728-5728*  
*Fax: (760) 728-5934*

 *After Hours Phone: (760) 728-5728*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-5PM*

**TEW, JOHN, MD**  
*Provider Gender: Male*  
*License Number: A83206*  
*NPI: 1174593354*  
*Provider English Spoken: Y*  
 *Portuguese*  
*Cultural Competency: Y*  
**INLAND EYE SPECIALISTS**  
 521 E ELDER ST STE 102  
 FALLBROOK, CA 92028  
 *Phone: (760) 728-5728*  
*Fax: (760) 728-5934*  
 *After Hours Phone: (760) 728-5728*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*

*restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-5PM*

### IMPERIAL BEACH

**HANONO, ABRAHAM, OD**  
*Provider Gender: Male*  
*License Number: 14900*  
*NPI: 1356754741*  
*Provider English Spoken: Y*  
 *Hebrew, Spanish*  
*Cultural Competency: Y*  
**IMPERIAL BEACH**  
**OPTOMETRY INC APC**  
 894 PALM AVE STE B  
 IMPERIAL BEACH, CA 91932  
 *Phone: (619) 424-9333*  
*Fax: (619) 424-3356*  
 *After Hours Phone: (619) 424-9333*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*

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## J. 眼科提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM

### HANONO, HELFON, OD

Provider Gender: Male

License Number: 6681

NPI: 1619942034

Provider English Spoken: Y

🗣️ Spanish

Cultural Competency: Y

IMPERIAL BEACH

OPTOMETRY INC APC

📍 894 PALM AVE STE B  
IMPERIAL BEACH, CA  
91932

📞 Phone: (619) 424-9333

Fax: (619) 424-3356

🕒 After Hours Phone: (619)  
424-9333

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿️ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-6PM

### LA JOLLA

#### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿️ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

#### CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634

NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿️ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

#### CODEN, DANIEL, MD

Provider Gender: Male

License Number: G57587

NPI: 1942317508

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

📞 Phone: (858) 457-3010

Fax: (858) 457-0028

🕒 After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

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## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish, Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM

### DEAN, MOENA, OD

Provider Gender: Female  
 License Number: 33955  
 NPI: 1265927578  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

9850 GENESEE AVE STE  
 310  
 LA JOLLA, CA 92037  
 Phone: (858) 457-3010  
 Fax: (858) 457-0028  
 After Hours Phone: (858)  
 457-3010  
 Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish, Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM

### DYER, SHARON, OD

Provider Gender: Female  
 License Number: 33450  
 NPI: 1063866887  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

9850 GENESEE AVE STE  
 310  
 LA JOLLA, CA 92037  
 Phone: (858) 457-3010  
 Fax: (858) 457-0028  
 After Hours Phone: (858)  
 457-3010  
 Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
 Spanish, Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM

### HO, AMIEE, OD

Provider Gender: Female

License Number: 14527  
 NPI: 1396009478  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 UCSD SHILEY EYE CENTER  
 9415 CAMPUS POINT DR  
 LA JOLLA, CA 92093  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921  
 After Hours Phone: (858)  
 534-6290  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender  
 restriction  
 American Sign Language (ASL):  
N

Accessibility: CONTACT  
 PROVIDER  
 Public transportation (within  
 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM  
 SA 8AM-2PM

### HO, AMIEE, OD

Provider Gender: Female  
 License Number: 14527  
 NPI: 1396009478  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 PERLMAN

OPHTHALMOLOGY-UCSD  
 9350 CAMPUS POINT DR  
 STE 1B  
 LA JOLLA, CA 92037  
 Phone: (858) 534-6290

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## J. 眼科提供者名录 - 眼科和视力服务

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4:30PM

### HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

🗨 Spanish

Cultural Competency: Y

UCSD SHILEY EYE CENTER

📍 9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM  
SA 8AM-2PM

### HOO, PAMELA, OD

Provider Gender: Female

License Number: 11033

NPI: 1275566010

Provider English Spoken: Y

🗨 Spanish

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

📍 9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

☎ Phone: (858) 534-6290

Fax: (858) 732-0921

☎ After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

🗨 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-4:30PM

### HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195

Provider English Spoken: Y  
Cultural Competency: Y

ACUITY EYE GROUP

📍 9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

☎ Phone: (858) 457-3010

Fax: (858) 457-0028

☎ After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

🗨 Site English Spoken: Y

🗨 Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-4:30PM

### HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

🗨 French

Cultural Competency: Y

PERLMAN

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

### HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y

French

Cultural Competency: Y

### UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

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

Arabic

Cultural Competency: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### KHALIL, VADY, OD

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

### ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### KHIEU, TINA, OD

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

### ACUITY EYE GROUP

9850 GENESEE AVE STE 310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858) 457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

### UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858) 534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM SA 8AM-2PM

### KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

### KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)

534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM  
SA 8AM-2PM

### KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

PERLMAN

OPHTHALMOLOGY-UCSD

9350 CAMPUS POINT DR  
STE 1B

LA JOLLA, CA 92037

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4:30PM

### LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

Cultural Competency: Y

UCSD SHILEY EYE CENTER

9415 CAMPUS POINT DR  
LA JOLLA, CA 92093

Phone: (858) 534-6290

Fax: (858) 732-0921

After Hours Phone: (858)  
534-6290

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM  
SA 8AM-2PM

### LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。






## J. 眼科提供者名录 - 眼科和视力服务






*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**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*

### **MCCLEAN, ESMERALDA, OD**

*Provider Gender: Female*  
*License Number: 15001*  
*NPI: 1962817981*  
*Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: Y*  
**PERLMAN**  
**OPHTHALMOLOGY-UCSD**  
 9350 CAMPUS POINT DR  
 STE 1B  
 LA JOLLA, CA 92037  
 *Phone: (858) 534-6290*  
*Fax: (858) 732-0921*  
 *After Hours Phone: (858)*  
*534-6290*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender*  
*restriction*  
*American Sign Language (ASL):*  
*N*  
 *Accessibility: CONTACT*  
**PROVIDER**  
*Public transportation (within*  
*1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-4:30PM*

### **MIZOGUCHI, LIANNE, OD**

*Provider Gender: Female*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

License Number: 10104  
 NPI: 1619900313  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 UCSD SHILEY EYE CENTER  
 9415 CAMPUS POINT DR  
 LA JOLLA, CA 92093  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921  
 After Hours Phone: (858) 534-6290  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM SA 8AM-2PM

### **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

### **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

PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM SA 8AM-2PM

### **MOOR, TRACY, OD**

Provider Gender: Female  
 License Number: 35085  
 NPI: 1184283277  
 Provider English Spoken: Y  
 Cultural Competency: Y

PERLMAN  
 OPHTHALMOLOGY-UCSD  
 9350 CAMPUS POINT DR  
 STE 1B  
 LA JOLLA, CA 92037  
 Phone: (858) 534-6290  
 Fax: (858) 732-0921

After Hours Phone: (858) 534-6290  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-4:30PM

### **MORRISON REYES, JOSHUA, MD**

Provider Gender: Male

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### PERRY, ARTHUR, MD

Provider Gender: Male

License Number: C37934

NPI: 1194832725

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE

310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### PRATT, STEVEN, MD

Provider Gender: Male

License Number: G32379

NPI: 1407963044

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

**PROVIDER**  
Public transportation (within  
1/2 mile from Site): 1U  
🕒 Hours: M-F 8AM-4:30PM

### TONNU, ANH, OD

Provider Gender: Female  
License Number: 11318  
NPI: 1679521280  
Provider English Spoken: Y  
🗳 Vietnamese  
Cultural Competency: Y  
ACUITY EYE GROUP  
📍 9850 GENESEE AVE STE  
310  
LA JOLLA, CA 92037  
📞 Phone: (858) 457-3010  
Fax: (858) 457-0028  
🕒 After Hours Phone: (858)  
457-3010  
Accepting New Patients: Yes  
🗳 Site English Spoken: Y  
🗳 Site Languages(s) Spoken:  
Spanish, Tagalog  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
🕒 Hours: M-F 8AM-4:30PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177  
NPI: 1003102724  
Provider English Spoken: Y  
Cultural Competency: Y  
ACUITY EYE GROUP

📍 9850 GENESEE AVE STE  
310  
LA JOLLA, CA 92037  
📞 Phone: (858) 457-3010  
Fax: (858) 457-0028  
🕒 After Hours Phone: (858)  
457-3010  
Accepting New Patients: Yes  
🗳 Site English Spoken: Y  
🗳 Site Languages(s) Spoken:  
Spanish, Tagalog  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
🕒 Hours: M-F 8AM-4:30PM

### VIVIRITO, MARY, OD

Provider Gender: Female  
License Number: 33798  
NPI: 1477968667  
Provider English Spoken: Y  
🗳 Spanish  
Cultural Competency: Y  
ACUITY EYE GROUP  
📍 9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037  
📞 Phone: (858) 457-3010  
Fax: (858) 457-0028  
🕒 After Hours Phone: (858)  
457-3010  
Accepting New Patients: Yes  
🗳 Site English Spoken: Y  
🗳 Site Languages(s) Spoken:  
Spanish, Tagalog  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
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  
🗳 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


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务




*Gender Restriction: 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*  
 *Vietnamese*  
*Cultural Competency: Y*

PERLMAN

OPHTHALMOLOGY-UCSD

 9350 CAMPUS POINT DR STE 1B  
 LA JOLLA, CA 92037  
 *Phone: (858) 534-6290*  
*Fax: (858) 732-0921*  
 *After Hours Phone: (858) 534-6290*


*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*


N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within*


*1/2 mile from Site): 1T*  
 *Hours: M-F 8AM-4:30PM*

### **YU, CAROL, OD**


*Provider Gender: Female*  
*License Number: 34047*  
*NPI: 1639697451*  
*Provider English Spoken: Y*  
 *Spanish, Chinese*  
*Cultural Competency: Y*

UCSD SHILEY EYE CENTER

 9415 CAMPUS POINT DR  
 LA JOLLA, CA 92093  
 *Phone: (858) 534-6290*  
*Fax: (858) 732-0921*

 *After Hours Phone: (858) 534-6290*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*


N

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM SA 8AM-2PM*

### **YU, CAROL, OD**


*Provider Gender: Female*  
*License Number: 34047*  
*NPI: 1639697451*  
*Provider English Spoken: Y*  
 *Spanish, Chinese*

*Cultural Competency: Y*

PERLMAN


OPHTHALMOLOGY-UCSD

 9350 CAMPUS POINT DR  
 STE 1B  
 LA JOLLA, CA 92037

 *Phone: (858) 534-6290*  
*Fax: (858) 732-0921*

 *After Hours Phone: (858) 534-6290*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*  
*Min/Max Age: 0\None*


*Gender Restriction: 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*

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## J. 眼科提供者名录 - 眼科和视力服务

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### ZHAO, TAILUN, MD

Provider Gender: Male

License Number: C186414

NPI: 1952659203

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### ZVANUT, DONALD, OD

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

9850 GENESEE AVE STE  
310

LA JOLLA, CA 92037

Phone: (858) 457-3010

Fax: (858) 457-0028

After Hours Phone: (858)  
457-3010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

## LA MESA

### AOTO, KIM, OD

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

Spanish, Vietnamese  
Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### AVALLONE, THOMAS, MD

Provider Gender: Male

License Number: A147199

NPI: 1679865950

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)

465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### BAGHOUMIAN, MARINEH, OD

Provider Gender: Female

License Number: 14842

NPI: 1972929438

Provider English Spoken: Y

Armenian

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### BAUMANN, DANIELA, OD

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **BAUMANN, DANIELA, OD**

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### **BINDER, NICHOLAS, MD**

Provider Gender: Male

License Number: A124698

NPI: 1306076716

Provider English Spoken: Y

Cultural Competency: Y

### **ACUITY EYE GROUP**

7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### **BUI, TINA, OD**

Provider Gender: Female

License Number: 33435

NPI: 1497107312

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

### **BUITIQUE OPTOMETRY**

5020 BALTIMORE DR STE  
B

LA MESA, CA 91942

Phone: (619) 464-8303

Fax: (619) 464-4971

After Hours Phone: (619)  
464-8303

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 9AM-5PM  
SA 9AM-2PM

### **CAUCHI, CAROLINE**

#### **GUERRERO, OD**

Provider Gender: Female

License Number: 6882

NPI: 1831268903

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

8235 UNIVERSITY AVE  
LA MESA, CA 91942

Phone: (619) 461-4913

Fax: (888) 509-6483

After Hours Phone: (619)  
461-4913

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。




## J. 眼科提供者名录 - 眼科和视力服务

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 9AM-5:30PM  
W 8AM-5PM  
TH 9AM-6PM  
F 8AM-1PM

### CHANG, TOM, MD

Provider Gender: Male

License Number: A69909


NPI: 1609848969

Provider English Spoken: Y


Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551  
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### CHEW, WESLEY, OD

Provider Gender: Male


License Number: 14901


NPI: 1952714446

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### CHIU, STEPHAN, MD

Provider Gender: Male

License Number: A172634


NPI: 1053846956

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551  
LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### COCKERHAM, KIMBERLY, MD

Provider Gender: Female

License Number: G86885

NPI: 1366493629

Provider English Spoken: Y






Cultural Competency: Y






ALVARADO EYE ASSOCIATES MED CLINIC INC



 7877 PARKWAY DR STE 100

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## J. 眼科提供者名录 - 眼科和视力服务


LA MESA, CA 91942  
 Phone: (619) 460-3711  
 Fax: (619) 460-2184  
 After Hours Phone: (619) 460-3711  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8:30AM-4:30PM

**CONRAD, RANDALL, OD**  
 Provider Gender: Male  
 License Number: 6423  
 NPI: 1962617464  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 ALVARADO EYE ASSOCIATES MED CLINIC INC  
 7877 PARKWAY DR STE 100  
 LA MESA, CA 91942  
 Phone: (619) 460-3711  
 Fax: (619) 460-2184  
 After Hours Phone: (619) 460-3711  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None








Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8:30AM-4:30PM

**DEAN, MOENA, OD**  
 Provider Gender: Female  
 License Number: 33955  
 NPI: 1265927578  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J  
 LA MESA, CA 91942  
 Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 After Hours Phone: (619) 722-8460  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within

1/2 mile from Site): 1T  
 Hours: M-F 8AM-5PM

**DEAN, MOENA, OD**  
 Provider Gender: Female  
 License Number: 33955  
 NPI: 1265927578  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 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

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## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y  
Cultural Competency: Y  
EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

☎ Phone: (619) 465-2020  
Fax: (619) 698-1189

🕒 After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

### DYER, SHARON, OD

Provider Gender: Female

License Number: 33450

NPI: 1063866887

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE  
J  
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

### GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

German, French, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE  
J  
LA MESA, CA 91942

☎ Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

### GOLLOGLY, HEIDRUN, MD

Provider Gender: Female

License Number: A134761

NPI: 1477879823

Provider English Spoken: Y

German, French, Spanish  
Cultural Competency: Y

EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

☎ Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y  
 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction


American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### **GRAY, IGA, MD**

Provider Gender: Female

License Number: A174875


NPI: 1033538350

Provider English Spoken: Y

Cultural Competency: Y

ALVARADO EYE ASSOCIATES  
MED CLINIC INC

 7877 PARKWAY DR STE 100  
LA MESA, CA 91942

 Phone: (619) 460-3711

Fax: (619) 460-2184

 After Hours Phone: (619)  
460-3711

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F  
8:30AM-4:30PM

### **HAIGHT, BRUCE, MD**

Provider Gender: Male

License Number: G41117

NPI: 1427029628


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### **HAIGHT, BRUCE, MD**

Provider Gender: Male

License Number: G41117

NPI: 1427029628


Provider English Spoken: Y

Cultural Competency: Y


EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT  
CENTER DR # 551

LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### **HAMOUIE, JUDY, OD**

Provider Gender: Female

License Number: 34984

NPI: 1518638287


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务


restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### HAN, SULKI, OD

Provider Gender: Female

License Number: 34171

NPI: 1750802195

Provider English Spoken: Y


Korean

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### HIXSON, THOMAS, OD

Provider Gender: Male

License Number: 7490

NPI: 1528072683


Provider English Spoken: Y

Cultural Competency: Y

LA MESA VISION CARE

 8007 LA MESA BLVD

LA MESA, CA 91942

 Phone: (619) 466-5665

Fax: (619) 466-5688

 After Hours Phone: (619) 466-5665

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 8AM-4PM

TU 9AM-6PM

W 8AM-4PM

TH 9AM-6PM

F 9AM-5PM

SA 8AM-1PM

### HSU, CHRISTOPHER, MD

Provider Gender: Male

License Number: A65973

NPI: 1336167618


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091

NPI: 1851349195


Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091


NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### HUNG, JANICE, OD

Provider Gender: Female


License Number: 34296


NPI: 1750917936

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438


Provider English Spoken: Y

Arabic


Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942

 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-5PM

### KALBAKJI, NATALY, OD

Provider Gender: Female

License Number: 34943

NPI: 1700556438

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

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, BARRY, MD

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Spanish

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE  
J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### 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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

📍 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

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

📍 5565 GROSSMONT CENTER DR # 551

LA MESA, CA 91942

📞 Phone: (619) 465-2020

Fax: (619) 698-1189

🕒 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 8AM-5PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

### **LEE, SALLY, DO**

Provider Gender: Female

License Number: 20A8088

NPI: 1457468514

Provider English Spoken: Y

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:

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## J. 眼科提供者名录 - 眼科和视力服务

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  
BUIIQUE OPTOMETRY

 5020 BALTIMORE DR STE B  
LA MESA, CA 91942  
 Phone: (619) 464-8303  
Fax: (619) 464-4971  
 After Hours Phone: (619) 464-8303

Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Vietnamese  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction




American Sign Language (ASL):  
N

 Accessibility: CONTACT



PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 9AM-5PM SA 9AM-2PM

### MANNEN, JOSEPH, OD

Provider Gender: Male  
License Number: 33650  
NPI: 1851827034  
Provider English Spoken: Y  
Cultural Competency: Y  
ALVARADO EYE ASSOCIATES  
MED CLINIC INC

 7877 PARKWAY DR STE 100  
LA MESA, CA 91942  
 Phone: (619) 460-3711  
Fax: (619) 460-2184  
 After Hours Phone: (619) 460-3711



Accepting New Patients: Yes  
 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8:30AM-4:30PM

### MARR, RYAN, OD

Provider Gender: Male  
License Number: 35302

NPI: 1235857525  
Provider English Spoken: Y  
Cultural Competency: Y  
EYE ASSOCIATES OF SAN  
DIEGO/ACUITY EYE GROUP



 5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942  
 Phone: (619) 465-2020  
Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes


Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-5PM

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

☎ Phone: (619) 722-8460  
 Fax: (619) 722-8465  
 📞 After Hours Phone: (619) 722-8460  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction

American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 🕒 Hours: M-F 8AM-5PM

### **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

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

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## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE  
J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

**MORRISON REYES, JOSHUA,  
MD**

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

5565 GROSSMONT  
CENTER DR # 551  
LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619)  
465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

**NGUYEN, THY, OD**

Provider Gender: Female

License Number: 12746

NPI: 1750490413

Provider English Spoken: Y

Spanish, Vietnamese  
Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE  
J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)  
722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F  
8:30AM-4:30PM

### **PANDYA, BHUMIKA, OD**

Provider Gender: Female

License Number: 35025

NPI: 1063182822

Provider English Spoken: Y

🗄 Hindi

Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🗄 Site English Spoken: Y

🗄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 8AM-5PM

### **PATEL, SARJAN, MD**

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

🗄 Gujarati, Hindi, Spanish Cultural Competency: Y

ACUITY EYE GROUP

📍 7339 EL CAJON BLVD STE J

LA MESA, CA 91942

📞 Phone: (619) 722-8460

Fax: (619) 722-8465

🕒 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

🗄 Site English Spoken: Y

🗄 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No 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

### **PETERS, JAMIE, OD**

Provider Gender: Female

License Number: 10724

NPI: 1073691077

Provider English Spoken: Y

🗄 Spanish

Cultural Competency: Y

VISION SOLUTIONS

OPTOMETRY

📍 8235 UNIVERSITY AVE

LA MESA, CA 91942

📞 Phone: (619) 461-4913

Fax: (888) 509-6483

🕒 After Hours Phone: (619) 461-4913

Accepting New Patients: Yes

🗄 Site English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

 Site Languages(s) Spoken: Spanish  
 American Sign Language (ASL): N

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): 1/2 mile from Site): 1T

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TU 9AM-5:30PM  
 W 8AM-5PM  
 TH 9AM-6PM  
 F 8AM-1PM

### PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

 Accessibility: CONTACT PROVIDER

Public transportation (within

1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y

 Spanish

Cultural Competency: Y


EYE ASSOCIATES OF SAN

DIEGO/ACUITY EYE GROUP

 5565 GROSSMONT

CENTER DR # 551

LA MESA, CA 91942


 Phone: (619) 465-2020

Fax: (619) 698-1189

 After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

### QUACH, PHUC, OD

Provider Gender: Male

License Number: 12891

NPI: 1770617805


Provider English Spoken: Y

 Spanish, Vietnamese Cultural Competency: Y

ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J

LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### SAMUEL, MICHAEL, MD

Provider Gender: Male

License Number: A83237

NPI: 1730175670

Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*  
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

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476

Provider English Spoken: Y

Cultural Competency: Y

EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP

5565 GROSSMONT CENTER DR # 551 LA MESA, CA 91942

Phone: (619) 465-2020

Fax: (619) 698-1189

After Hours Phone: (619) 465-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-5PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### TRAN, HENRY, OD

Provider Gender: Male

License Number: 15159

NPI: 1467846709

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619)

722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### TSUI, NANCY, OD

Provider Gender: Female

License Number: 33944

NPI: 1841785037

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J

LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### TU, BEVERLY, OD

Provider Gender: Female


License Number: 34108


NPI: 1053892794

Provider English Spoken: Y

 Spanish, Vietnamese Cultural Competency: Y

### ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942


 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

 Site English Spoken: Y


 Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-5PM

### VINH, JOHN, OD

Provider Gender: Male

License Number: 14177


NPI: 1003102724

Provider English Spoken: Y

Cultural Competency: Y

### 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

### 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

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798


NPI: 1477968667


Provider English Spoken: Y

 Spanish

Cultural Competency: Y

### ACUITY EYE GROUP

 7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

 Phone: (619) 722-8460

Fax: (619) 722-8465

 After Hours Phone: (619) 722-8460

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

<p>Accepting New Patients: Yes  <input type="checkbox"/> Site English Spoken: Y  <input type="checkbox"/> Site Languages(s) Spoken: Spanish                      Min/Max Age: 0\None                      Gender Restriction: No Gender restriction                      American Sign Language (ASL): N  <input type="checkbox"/> Accessibility: CONTACT PROVIDER                      Public transportation (within 1/2 mile from Site): 1T  <input type="clock"/> Hours: M-F 8AM-5PM</p>	<p>restriction                      American Sign Language (ASL): N  <input type="checkbox"/> Accessibility: CONTACT PROVIDER                      Public transportation (within 1/2 mile from Site): 1U  <input type="clock"/> Hours: M-F 8AM-5PM</p>	<p><input type="clock"/> Hours: M-F 8AM-5PM</p>
<p><b>VIVIRITO, MARY, OD</b>                      Provider Gender: Female                      License Number: 33798                      NPI: 1477968667                      Provider English Spoken: Y  <input type="checkbox"/> Spanish                      Cultural Competency: Y                      EYE ASSOCIATES OF SAN DIEGO/ACUITY EYE GROUP  <input type="map"/> 5565 GROSSMONT CENTER DR # 551                      LA MESA, CA 91942  <input type="phone"/> Phone: (619) 465-2020                      Fax: (619) 698-1189  <input type="clock"/> After Hours Phone: (619) 465-2020                      Accepting New Patients: Yes  <input type="checkbox"/> Site English Spoken: Y  <input type="checkbox"/> Site Languages(s) Spoken: Spanish                      Min/Max Age: 0\None                      Gender Restriction: No Gender</p>	<p><b>WONG, SHARON, OD</b>                      Provider Gender: Female                      License Number: 15137                      NPI: 1497159552                      Provider English Spoken: Y  <input type="checkbox"/> Spanish                      Cultural Competency: Y                      ACUITY EYE GROUP  <input type="map"/> 7339 EL CAJON BLVD STE J                      LA MESA, CA 91942  <input type="phone"/> Phone: (619) 722-8460                      Fax: (619) 722-8465  <input type="clock"/> After Hours Phone: (619) 722-8460                      Accepting New Patients: Yes  <input type="checkbox"/> Site English Spoken: Y  <input type="checkbox"/> Site Languages(s) Spoken: Spanish                      Min/Max Age: 0\None                      Gender Restriction: No Gender restriction                      American Sign Language (ASL): N  <input type="checkbox"/> Accessibility: CONTACT PROVIDER                      Public transportation (within 1/2 mile from Site): 1T</p>	<p><b>YOUNG, ALLA, OD</b>                      Provider Gender: Female                      License Number: 34191                      NPI: 1285085142                      Provider English Spoken: Y  <input type="checkbox"/> Russian                      Cultural Competency: Y                      ALVARADO EYE ASSOCIATES MED CLINIC INC  <input type="map"/> 7877 PARKWAY DR STE 100                      LA MESA, CA 91942  <input type="phone"/> Phone: (619) 460-3711                      Fax: (619) 460-2184  <input type="clock"/> After Hours Phone: (619) 460-3711                      Accepting New Patients: Yes  <input type="checkbox"/> Site English Spoken: Y                      Min/Max Age: 0\None                      Gender Restriction: No Gender restriction                      American Sign Language (ASL): N  <input type="checkbox"/> Accessibility: CONTACT PROVIDER                      Public transportation (within 1/2 mile from Site): 1U  <input type="clock"/> Hours: M-F 8:30AM-4:30PM</p>
<p>Gender Restriction: No Gender restriction                      American Sign Language (ASL): N  <input type="checkbox"/> Accessibility: CONTACT PROVIDER                      Public transportation (within 1/2 mile from Site): 1U  <input type="clock"/> Hours: M-F 8:30AM-4:30PM</p>	<p><b>ZAIDI, NOORINA, OD</b>                      Provider Gender: Female                      License Number: 35615                      NPI: 1023477262                      Provider English Spoken: Y                      Cultural Competency: Y</p>	

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### 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

ACUITY EYE GROUP

7339 EL CAJON BLVD STE J  
LA MESA, CA 91942

Phone: (619) 722-8460

Fax: (619) 722-8465

After Hours Phone: (619) 722-8460

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### 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

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

**PROVIDER**  
Public transportation (within  
1/2 mile from Site): 1U  
🕒 Hours: M-F 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

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。









## J. 眼科提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM*



### **DEAN, MOENA, OD**

*Provider Gender: Female*  
*License Number: 33955*  
*NPI: 1265927578*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
WEST COAST EYE CARE  
 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950  
 *Phone: (619) 470-2700*  
*Fax: (619) 267-8221*  
 *After Hours Phone: (619) 470-2700*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-4:30PM*






### **DYER, SHARON, OD**

*Provider Gender: Female*  
*License Number: 33450*  
*NPI: 1063866887*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
WEST COAST EYE CARE  
 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950  
 *Phone: (619) 470-2700*  
*Fax: (619) 267-8221*  
 *After Hours Phone: (619) 470-2700*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-4:30PM*

### **DYER, SHARON, OD**

*Provider Gender: Female*  
*License Number: 33450*  
*NPI: 1063866887*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
ACUITY EYE GROUP  
 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950  
 *Phone: (619) 472-1010*

*Fax: (619) 479-5233*

 *After Hours Phone: (619) 472-1010*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Language(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
 *Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM*

### **GOLLOGLY, HEIDRUN, MD**

*Provider Gender: Female*  
*License Number: A134761*  
*NPI: 1477879823*  
*Provider English Spoken: Y*  
 *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 Language(s) Spoken:*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TU 8AM-6PM  
 W 8:30AM-5PM  
 TH 8AM-6PM  
 F 8AM-5PM

### HAIGHT, BRUCE, MD

Provider Gender: Male  
 License Number: G41117  
 NPI: 1427029628  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 655 EUCLID AVE STE 302  
 NATIONAL CITY, CA 91950  
 Phone: (619) 472-1010  
 Fax: (619) 479-5233  
 After Hours Phone: (619) 472-1010  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TU 8AM-6PM  
 W 8:30AM-5PM  
 TH 8AM-6PM  
 F 8AM-5PM

### HUDSON, HENRY, MD

Provider Gender: Male  
 License Number: G76091  
 NPI: 1851349195  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 655 EUCLID AVE STE 302  
 NATIONAL CITY, CA 91950  
 Phone: (619) 472-1010  
 Fax: (619) 479-5233  
 After Hours Phone: (619) 472-1010  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TU 8AM-6PM  
 W 8:30AM-5PM  
 TH 8AM-6PM

F 8AM-5PM

### HUNG, JANICE, OD

Provider Gender: Female  
 License Number: 34296  
 NPI: 1750917936  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 WEST COAST EYE CARE  
 2240 E PLAZA BLVD STE FG  
 NATIONAL CITY, CA 91950  
 Phone: (619) 470-2700  
 Fax: (619) 267-8221  
 After Hours Phone: (619) 470-2700  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM

### KALBAKJI, NATALY, OD

Provider Gender: Female  
 License Number: 34943  
 NPI: 1700556438  
 Provider English Spoken: Y  
 Arabic  
 Cultural Competency: Y  
 WEST COAST EYE CARE

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### **KALBAKJI, NATALY, OD**

Provider Gender: Female

License Number: 34943

NPI: 1700556438

Provider English Spoken: Y

Arabic

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### **KALRA, ANKUR, OD**

Provider Gender: Male

License Number: 11898

NPI: 1124195789

Provider English Spoken: Y

Hindi

Cultural Competency: Y

LUSTRO EYEWORKS

OPTOMETRY

1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950

Phone: (619) 477-2159

Fax: (619) 477-2128

After Hours Phone: (619) 477-2159

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Arabic, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM

### **KATZMAN, BARRY, MD**

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **KEDDINGTON, JOAN, OD**


Provider Gender: Female  
License Number: 6263  
NPI: 1992872691  
Provider English Spoken: Y

 Spanish  
Cultural Competency: Y

### **LUSTRO EYEWORKS**

#### **OPTOMETRY**

 1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950


 Phone: (619) 477-2159

Fax: (619) 477-2128

 After Hours Phone: (619)  
477-2159

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Arabic, Hindi, Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584


Provider English Spoken: Y

 Arabic


Cultural Competency: Y

### **ACUITY EYE GROUP**

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y


 Arabic

Cultural Competency: Y

### **WEST COAST EYE CARE**

 2240 E PLAZA BLVD STE  
FG

NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617


Provider English Spoken: Y

Cultural Competency: Y

### **WEST COAST EYE CARE**

 2240 E PLAZA BLVD STE  
FG

NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

- N**  
 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: M-F 8AM-4:30PM*
- KHIEU, TINA, OD**  
*Provider Gender: Female*  
*License Number: 34777*  
*NPI: 1962031617*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**ACUITY EYE GROUP**  
 655 EUCLID AVE STE 302  
 NATIONAL CITY, CA 91950  
 *Phone: (619) 472-1010*  
*Fax: (619) 479-5233*  
 *After Hours Phone: (619) 472-1010*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
 *Site Languages(s) Spoken: Spanish*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*
- KING, MARY, OD**  
*Provider Gender: Female*  
*License Number: 13711*  
*NPI: 1578792107*  
*Provider English Spoken: Y*  
 *Spanish*  
*Cultural Competency: Y*  
**LUSTRO EYEWORKS OPTOMETRY**  
 1481 E PLAZA BLVD  
 NATIONAL CITY, CA 91950  
 *Phone: (619) 477-2159*  
*Fax: (619) 477-2128*  
 *After Hours Phone: (619) 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*
- LEE, MARY, OD**  
 *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*
- LEE, SALLY, DO**  
*Provider Gender: Female*  
*License Number: 20A8088*  
*NPI: 1457468514*  
*Provider English Spoken: Y*  
 *Spanish, Chinese*  
*Cultural Competency: Y*  
**SAN DIEGO EYE PROFESSIONALS**  
 2345 E 8TH ST STE 111  
 NATIONAL CITY, CA 91950  
 *Phone: (619) 583-4295*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Fax: (619) 825-7300

☎ After Hours Phone: (619)  
583-4295

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: TH-F 9AM-5PM

### MARLAY, GREG, OD

Provider Gender: Male

License Number: 6998

NPI: 1306903083

Provider English Spoken: Y

Cultural Competency: Y

MARLAY ENTERPRISES

📍 1132 E PLAZA BLVD STE 201  
NATIONAL CITY, CA 91950

☎ Phone: (619) 477-4166

☎ After Hours Phone: (619)  
477-4166

Accepting New Patients: Yes

☐ Site English Spoken: Y

☐ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM  
W 10AM-6PM  
F 10AM-6PM  
SA 10AM-2PM

### MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

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

### MCGRAW, JOSEPH, MD

Provider Gender: Male

License Number: A155228

NPI: 1588624852

Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*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

Spanish

Cultural Competency: Y

NATIONAL CITY EYECARE

2403 E PLAZA BLVD  
NATIONAL CITY, CA 91950

Phone: (619) 475-2184

Fax: (619) 475-3917

After Hours Phone: (619)  
475-2184

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-TU 10AM-5PM  
TH-F 10AM-5PM

### MORRISON REYES, JOSHUA, MD

Provider Gender: Male

License Number: A125435

NPI: 1235366782

Provider English Spoken: Y

Indonesian, Spanish  
Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

🕒 *Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM*

### **MORRISON REYES, JOSHUA, MD**

*Provider Gender: Male  
License Number: A125435  
NPI: 1235366782  
Provider English Spoken: Y*  
🗳 *Indonesian, Spanish  
Cultural Competency: Y*  
WEST COAST EYE CARE  
📍 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950  
📞 *Phone: (619) 470-2700  
Fax: (619) 267-8221*  
📞 *After Hours Phone: (619) 470-2700*  
*Accepting New Patients: Yes*  
🗳 *Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
♿ *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
🕒 *Hours: M-F 8AM-4:30PM*

### **NGUYEN, THERESA, OD**

*Provider Gender: Female  
License Number: 35530TLG*

*NPI: 1609555713  
Provider English Spoken: Y  
Cultural Competency: Y*  
LUSTRO EYEWORKS OPTOMETRY  
📍 1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950  
📞 *Phone: (619) 477-2159  
Fax: (619) 477-2128*  
📞 *After Hours Phone: (619) 477-2159*  
*Accepting New Patients: Yes*  
🗳 *Site English Spoken: Y*  
🗳 *Site Languages(s) Spoken: Arabic, Hindi, Spanish*  
*Min/Max Age: 0\None  
Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
♿ *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1T*  
🕒 *Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM*

### **PATEL, SARJAN, MD**

*Provider Gender: Male  
License Number: A114976  
NPI: 1316199326  
Provider English Spoken: Y*  
🗳 *Gujarati, Hindi, Spanish  
Cultural Competency: Y*  
WEST COAST EYE CARE  
📍 2240 E PLAZA BLVD STE

FG  
NATIONAL CITY, CA 91950  
📞 *Phone: (619) 470-2700  
Fax: (619) 267-8221*  
📞 *After Hours Phone: (619) 470-2700*  
*Accepting New Patients: Yes*  
🗳 *Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction*  
*American Sign Language (ASL): N*  
♿ *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
🕒 *Hours: M-F 8AM-4:30PM*

### **PATEL, GITANE, MD**

*Provider Gender: Male  
License Number: A108603  
NPI: 1710171434  
Provider English Spoken: Y  
Cultural Competency: Y*  
WEST COAST EYE CARE  
📍 2240 E PLAZA BLVD STE FG  
NATIONAL CITY, CA 91950  
📞 *Phone: (619) 470-2700  
Fax: (619) 267-8221*  
📞 *After Hours Phone: (619) 470-2700*  
*Accepting New Patients: Yes*  
🗳 *Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务


restriction

American Sign Language (ASL): Provider Gender: Male

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### PRABHU, SUJATA, MD

Provider Gender: Female

License Number: A115965

NPI: 1982872552

Provider English Spoken: Y


 Spanish

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG

NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### SCOTT, JEFFREY, OD

Provider Gender: Male

License Number: 34978

NPI: 1568813434


Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG

NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990

NPI: 1245733476


Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 2240 E PLAZA BLVD STE FG

NATIONAL CITY, CA 91950

 Phone: (619) 470-2700

Fax: (619) 267-8221

 After Hours Phone: (619) 470-2700

Accepting New Patients: Yes

 Site English Spoken: Y

Min/Max Age: 0\None


Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M-F 8AM-4:30PM

### TON-NU, MY LINH, OD

Provider Gender: Female

License Number: 34990


NPI: 1245733476

Provider English Spoken: Y


Cultural Competency: Y

ACUITY EYE GROUP

 655 EUCLID AVE STE 302 NATIONAL CITY, CA 91950


 Phone: (619) 472-1010

Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

*American Sign Language (ASL): Public transportation (within 1/2 mile from Site): 1T*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

 *Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM*

### **TOUBIA, ELIAS, OD**

*Provider Gender: Male*

*License Number: 33758*

*NPI: 1740701481*

*Provider English Spoken: Y*


 *Arabic*

*Cultural Competency: Y*

**LUSTRO EYEWORKS**

**OPTOMETRY**

 1481 E PLAZA BLVD  
NATIONAL CITY, CA 91950


 *Phone: (619) 477-2159*

*Fax: (619) 477-2128*

 *After Hours Phone: (619) 477-2159*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*


 *Site Languages(s) Spoken: Arabic, Hindi, Spanish*


*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

 *Hours: SU 10AM-4PM  
M-F 9AM-6PM  
SA 9AM-5PM*

### **VINH, JOHN, OD**

*Provider Gender: Male*

*License Number: 14177*


*NPI: 1003102724*

*Provider English Spoken: Y*


*Cultural Competency: Y*

**ACUITY EYE GROUP**

 655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950


 *Phone: (619) 472-1010*

*Fax: (619) 479-5233*

 *After Hours Phone: (619) 472-1010*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

 *Site Languages(s) Spoken: Spanish*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

 *Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM*

### **VINH, JOHN, OD**

*Provider Gender: Male*


*License Number: 14177*


*NPI: 1003102724*

*Provider English Spoken: Y*

*Cultural Competency: Y*

**WEST COAST EYE CARE**

 2240 E PLAZA BLVD STE  
FG  
NATIONAL CITY, CA 91950

 *Phone: (619) 470-2700*

*Fax: (619) 267-8221*

 *After Hours Phone: (619) 470-2700*

*Accepting New Patients: Yes*

 *Site English Spoken: Y*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M-F 8AM-4:30PM*

### **VIVIRITO, MARY, OD**

*Provider Gender: Female*

*License Number: 33798*

*NPI: 1477968667*

*Provider English Spoken: Y*

 *Spanish*






*Cultural Competency: Y*

**WEST COAST EYE CARE**

 2240 E PLAZA BLVD STE  
FG



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NATIONAL CITY, CA 91950  
 Phone: (619) 470-2700  
 Fax: (619) 267-8221  
 After Hours Phone: (619) 470-2700  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M-F 8AM-4:30PM

### VIVIRITO, MARY, OD

Provider Gender: Female  
 License Number: 33798  
 NPI: 1477968667  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 ACUITY EYE GROUP  
 655 EUCLID AVE STE 302  
 NATIONAL CITY, CA 91950  
 Phone: (619) 472-1010  
 Fax: (619) 479-5233  
 After Hours Phone: (619) 472-1010  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None







Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TU 8AM-6PM  
 W 8:30AM-5PM  
 TH 8AM-6PM  
 F 8AM-5PM


### WU, EVA, OD

Provider Gender: Female  
 License Number: 14743  
 NPI: 1073954442  
 Provider English Spoken: Y

 Spanish, Chinese  
 Cultural Competency: Y



### VIVE OPTOMETRY






 1033 HIGHLAND AVE  
 NATIONAL CITY, CA 91950  
 Phone: (619) 477-2771  
 Fax: (619) 477-1680  
 After Hours Phone: (619) 477-2771  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish, Tagalog  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT

PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: TU 10AM-5PM  
 W-F 9:30AM-5PM

### ZAIDI, NOORINA, OD

Provider Gender: Female  
 License Number: 35615  
 NPI: 1023477262  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 ACUITY EYE GROUP

 655 EUCLID AVE STE 302  
 NATIONAL CITY, CA 91950  
 Phone: (619) 472-1010  
 Fax: (619) 479-5233

 After Hours Phone: (619) 472-1010  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TU 8AM-6PM  
 W 8:30AM-5PM  
 TH 8AM-6PM  
 F 8AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

### **ZAIDI, NOORINA, OD**

Provider Gender: Female

License Number: 35615

NPI: 1023477262

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

2240 E PLAZA BLVD STE  
FG

NATIONAL CITY, CA 91950

Phone: (619) 470-2700

Fax: (619) 267-8221

After Hours Phone: (619)  
470-2700

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-4:30PM

### **ZVANUT, DONALD, OD**

Provider Gender: Male

License Number: 8642

NPI: 1336211804

Provider English Spoken: Y

Cultural Competency: Y

ACUITY EYE GROUP

655 EUCLID AVE STE 302  
NATIONAL CITY, CA 91950

Phone: (619) 472-1010

Fax: (619) 479-5233

After Hours Phone: (619)  
472-1010

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N  
Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 8AM-6PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-5PM

## OCEANSIDE

### **KASAI, SARAH, OD**

Provider Gender: Female

License Number: 34226

NPI: 1023406238

Provider English Spoken: Y

Cultural Competency: Y

NORTH COAST OPTOMETRY

3915 MISSION AVE STE 2  
OCEANSIDE, CA 92058

Phone: (760) 757-8771

After Hours Phone: (760)  
757-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N  
Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-TU 9AM-6PM  
W 10AM-7PM  
TH 9AM-6PM  
F 9AM-5PM

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

### PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-6PM  
W 10AM-7PM  
TH 9AM-6PM  
F 9AM-5PM

### ROSA, ADAM, OD

Provider Gender: Male

License Number: 34093

NPI: 1295250264

Provider English Spoken: Y

🗣️ Spanish

Cultural Competency: Y

NORTH COAST OPTOMETRY

📍 3915 MISSION AVE STE 2  
OCEANSIDE, CA 92058

📞 Phone: (760) 757-8771

🕒 After Hours Phone: (760)  
757-8771

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

🗣️ Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-TU 9AM-6PM  
W 10AM-7PM  
TH 9AM-6PM  
F 9AM-5PM

### RAMONA

### HOMESLEY, SUSAN, OD

Provider Gender: Female

License Number: 6693

NPI: 1720068984

Provider English Spoken: Y

🗣️ Spanish

Cultural Competency: Y

SUSAN D HOMESLEY OD

📍 1516 MAIN ST STE 102  
RAMONA, CA 92065

📞 Phone: (760) 789-0950

Fax: (760) 789-6057

🕒 After Hours Phone: (760)  
789-0950

Accepting New Patients: Yes

🗣️ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

☎ Phone: (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

🗣 Spanish, Vietnamese Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

☎ Phone: (858) 565-8822

Fax: (858) 565-2449

📞 After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

🗣 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM  
TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

### **AOTO, KIM, OD**

Provider Gender: Female

License Number: 14524

NPI: 1780935650

Provider English Spoken: Y

🗣 Spanish, Vietnamese 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y

Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### **BAUMANN, DANIELA, OD**

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT

PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U

Hours: M 10AM-6PM

TU 8:30AM-5PM

W 7:30AM-4PM

TH 9:30AM-5PM

F 8AM-4PM

### **BAUMANN, DANIELA, OD**

Provider Gender: Female

License Number: 34530

NPI: 1982232146

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

Phone: (619) 697-4600

Fax: (619) 697-2410

After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM

TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

### **BEAUDRY, AMANDA, OD**

Provider Gender: Female

License Number: 33385

NPI: 1477903516

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM




了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务



### **BERGMARK, JAMIE, OD**

*Provider Gender: Female*  
*License Number: 33657*  
*NPI: 1669920757*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*

### **RADY CHILDRENS SPECIALISTS**

 7910 FROST ST STE 200  
SAN DIEGO, CA 92123  
 *Phone: (858) 309-7702*  
*Fax: (858) 966-8901*  
 *After Hours Phone: (858)  
309-7702*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
restriction*

*American Sign Language (ASL):  
N*




 *Accessibility: CONTACT  
PROVIDER*  
*Public transportation (within  
1/2 mile from Site): 1U*  
 *Hours: M-F 7AM-5PM*

### **BHATIA, SHAGUN, MD**



*Provider Gender: Female*  
*License Number: A154902*  
*NPI: 1104237353*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*

### **RADY CHILDRENS SPECIALISTS**

 7910 FROST ST STE 200

SAN DIEGO, CA 92123  
 *Phone: (858) 309-7702*  
*Fax: (858) 966-8901*  
 *After Hours Phone: (858)  
309-7702*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
restriction*



*American Sign Language (ASL):  
N*

 *Accessibility: CONTACT  
PROVIDER*  
*Public transportation (within  
1/2 mile from Site): 1U*  
 *Hours: M-F 7AM-5PM*

### **BINDER, NICHOLAS, MD**



*Provider Gender: Male*  
*License Number: A124698*  
*NPI: 1306076716*  
*Provider English Spoken: Y*  
*Cultural Competency: Y*  
**WEST COAST EYE CARE**

 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
 *Phone: (619) 697-4600*  
*Fax: (619) 697-2410*

 *After Hours Phone: (619)  
697-4600*  
*Accepting New Patients: Yes*  
 *Site English Spoken: Y*  
*Min/Max Age: 0\None*  
*Gender Restriction: No Gender  
restriction*



*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*



### **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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### BOECK, CARL, OD

Provider Gender: Male  
License Number: 6620  
NPI: 1588656151

Provider English Spoken: Y  
☐ German, Spanish  
Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

📍 7246 CLAIREMONT MESA BLVD  
SAN DIEGO, CA 92111

☎ Phone: (858) 292-7193  
Fax: (858) 292-8247

🕒 After Hours Phone: (858) 292-7193

Accepting New Patients: Yes

☐ Site English Spoken: Y  
☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M 8AM-5PM  
TU-TH 9AM-6PM  
F 8AM-5PM

### CAO, STEPHANIE, OD

Provider Gender: Female  
License Number: 35158  
NPI: 1215660436

Provider English Spoken: Y  
Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

📍 5638 MISSION CENTER RD STE 103  
SAN DIEGO, CA 92108

☎ Phone: (619) 295-2900  
Fax: (888) 210-5799

🕒 After Hours Phone: (619) 295-2900

Accepting New Patients: Yes

☐ Site English Spoken: Y  
☐ Site Languages(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-5:30PM  
SA 9AM-3PM

### CAO, STEPHANIE, OD

Provider Gender: Female  
License Number: 35158  
NPI: 1215660436

Provider English Spoken: Y  
Cultural Competency: Y

OPTOM-EYES VISION CARE OPTOMETRY

📍 1555 PALM AVE STE A2  
SAN DIEGO, CA 92154

☎ Phone: (619) 297-2020  
Fax: (888) 210-5799

🕒 After Hours Phone: (619) 297-2020

Accepting New Patients: Yes

☐ Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 9:30AM-6PM  
SA 9AM-3PM

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

- Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-TU 9AM-5PM  
 W 10AM-6PM  
 F 9AM-5PM  
 SA 9AM-1PM
- CHAIN, PEI CHI, OD**  
 Provider Gender: Female  
 License Number: 34439  
 NPI: 1730676727  
 Provider English Spoken: Y  
 Spanish, Chinese  
 Cultural Competency: Y  
 SPOTLIGHT OPTOMETRY  
 7835 HIGHLANDS VLG PL D 106  
 SAN DIEGO, CA 92129  
 Phone: (858) 250-0052  
 Fax: (858) 788-0287  
 After Hours Phone: (858) 250-0052  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction
- CHEN, LESLIE, OD**  
 Provider Gender: Female  
 License Number: 12792  
 NPI: 1508953332  
 Provider English Spoken: Y  
 Chinese  
 Cultural Competency: Y  
 EYE STUDIO OPTOMETRY  
 4475 UNIVERSITY AVE  
 SAN DIEGO, CA 92105  
 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
- 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1164586244

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD  
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)  
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM  
SA 8:30AM-2PM

### DAVIS, JADE, OD

Provider Gender: Female

License Number: 11765

NPI: 1457303398

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE  
OPTOMETRY

5638 MISSION CENTER RD  
STE 103

SAN DIEGO, CA 92108

Phone: (619) 295-2900

Fax: (888) 210-5799

After Hours Phone: (619)  
295-2900

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 9AM-5:30PM  
SA 9AM-3PM

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

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

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

Site 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

### **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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M 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 Language(s) Spoken: Spanish, Vietnamese*

*Min/Max Age: 0\None*


*Gender Restriction: No Gender restriction*

*American Sign Language (ASL):*

*N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1T*

 *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*



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 **Accessibility: CONTACT PROVIDER**  
Public transportation (within 1/2 mile from Site): 1T  
 **Hours: M-F 8AM-5PM**




### HOANG, KEVIN, OD



Provider Gender: Male  
License Number: 34401  
NPI: 1790339216  
Provider English Spoken: Y  
 **Spanish**  
Cultural Competency: Y  
JASMINE P NGUYEN OD INC  
 4029 43RD ST STE 300  
SAN DIEGO, CA 92105  
 **Phone: (619) 284-3937**  
**Fax: (619) 284-3938**  
 **After Hours Phone: (619) 284-3937**  
Accepting New Patients: Yes  
 **Site English Spoken: Y**  
 **Site Languages(s) Spoken: Spanish, Vietnamese**  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N

 **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

 **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**

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-4PM

### HUDSON, HENRY, MD

Provider Gender: Male

License Number: G76091


NPI: 1851349195

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

 Phone: (619) 697-4600

Fax: (619) 697-2410

 After Hours Phone: (619)  
697-4600

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM

W 8:30AM-5PM

TH 8AM-6PM

F 8AM-4PM

### HUSTANA, LARA, OD

Provider Gender: Female

License Number: 11472

NPI: 1235161597

Provider English Spoken: Y


French

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

 4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

 Phone: (619) 543-6244

Fax: (619) 295-5034

 After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y


Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-F 8AM-4PM

### HUYNH, LOAN, OD

Provider Gender: Female

License Number: 34472

NPI: 1003454604

Provider English Spoken: Y


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

Vietnamese

Cultural Competency: Y

CRYSTAL EYESITE

OPTOMETRY

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

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

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

Vietnamese

Cultural Competency: Y

ADVANCED EYE AND LASER CTR OF CA INC

4844 UNIVERSITY AVE STE A

SAN DIEGO, CA 92105

Phone: (619) 283-1303

Fax: (619) 283-1666

After Hours Phone: (619) 283-1303

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender

restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-F 8AM-5PM

### 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

### **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  
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  
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  
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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### **KATZMAN, BARRY, MD**

Provider Gender: Male

License Number: A34834

NPI: 1760473797

Provider English Spoken: Y

🗨️ Spanish

Cultural Competency: Y

WEST COAST EYE CARE

📍 4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

📞 Phone: (858) 565-8822

Fax: (858) 565-2449

🕒 After Hours Phone: (858)  
565-8822

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within 1/2 mile from Site): 1U

🕒 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### **KHALIGHI, PAYMAN, OD**

Provider Gender: Male

License Number: 13014

NPI: 1396897880

Provider English Spoken: Y

🗨️ Spanish

Cultural Competency: Y

JASMINE P NGUYEN OD INC

📍 4029 43RD ST STE 300  
SAN DIEGO, CA 92105

📞 Phone: (619) 284-3937

Fax: (619) 284-3938

🕒 After Hours Phone: (619)  
284-3937

Accepting New Patients: Yes

🗨️ Site English Spoken: Y

🗨️ Site Language(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within 1/2 mile from Site): 1T

🕒 Hours: M-F 9AM-5PM  
SA 9AM-1PM

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

🗨️ Arabic

Cultural Competency: Y

WEST COAST EYE CARE

📍 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

### **KHALIL, VADY, OD**

Provider Gender: Male

License Number: 35137

NPI: 1275263584

Provider English Spoken: Y

🗨️ Arabic

Cultural Competency: Y

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

📞 Phone: (619) 697-4600

Fax: (619) 697-2410

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

After Hours Phone: (619) 697-4600

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### **KHAN, FAHAD, MD**

Provider Gender: Male

License Number: A163142

NPI: 1548605843

Provider English Spoken: Y

Hindi

Cultural Competency: Y  
VISION SPECIALISTS OF CALIFORNIA

233 LEWIS ST  
SAN DIEGO, CA 92103

Phone: (619) 501-9050

Fax: (619) 501-9054

After Hours Phone: (619) 501-9050

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken: Bengali, Hindi, Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M-TH 8AM-5PM  
F 8AM-4PM

### **KHIEU, TINA, OD**

Provider Gender: Female

License Number: 34777

NPI: 1962031617

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1750066726

Provider English Spoken: Y

Cultural Competency: Y

EYELUX OPTOMETRY

16615 DOVE CANYON RD  
STE 105

SAN DIEGO, CA 92127

Phone: (858) 487-7900

Fax: (858) 487-1896

After Hours Phone: (858)  
487-7900

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 8AM-5PM  
SA 8:30AM-2PM

### KIM, PHILIP, OD

Provider Gender: Male

License Number: 33893

NPI: 1376929034

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### KLAREN, AMANDA, OD

Provider Gender: Female

License Number: 12617

NPI: 1396876611

Provider English Spoken: Y

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT

PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### KULISCHAK, JOHN, OD

Provider Gender: Male

License Number: 9279

NPI: 1740205236

Provider English Spoken: Y

Cultural Competency: Y

HILLCREST EYE

CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244

Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### LAM, ANNE, OD

Provider Gender: Female

License Number: 12810

NPI: 1174550768

Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*

HILLCREST EYE  
CENTER-UCSD

4060 4TH AVE STE 610  
SAN DIEGO, CA 92103

Phone: (619) 543-6244  
Fax: (619) 295-5034

After Hours Phone: (619)  
543-6244

Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

Hours: M-F 8AM-4PM

### LARSEN, STEVEN, OD

Provider Gender: Male

License Number: 7687

NPI: 1629194782

Provider English Spoken: Y

Spanish

Cultural Competency: Y

UPTOWN OPTOMETRY

4096 PARK BLVD  
SAN DIEGO, CA 92103

Phone: (619) 291-5505  
Fax: (619) 291-4404

After Hours Phone: (619)  
291-5505

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: TU-F 9AM-3PM  
SA 10AM-2PM

### LAU, JANICE, OD

Provider Gender: Female

License Number: 13037

NPI: 1952453300

Provider English Spoken: Y

Cultural Competency: Y

SABRE SPRINGS OPTOMETRY

12650 SABRE SPGS PKWY  
STE 203

SAN DIEGO, CA 92128

Phone: (858) 748-1265  
Fax: (844) 269-9527

After Hours Phone: (858)  
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M-TU 9AM-5PM  
W 10AM-6PM  
TH 9AM-5PM  
F 10AM-6PM

### LAU, KUEN CHINE, OD

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE  
OPTOMETRY

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

1/2 mile from Site): 1U

🕒 Hours: M-F 9AM-5:30PM  
SA 9AM-3PM

### **LAU, KUEN CHINE, OD**

Provider Gender: Male

License Number: 11166

NPI: 1821001645

Provider English Spoken: Y

Cultural Competency: Y

OPTOM-EYES VISION CARE  
OPTOMETRY

📍 1555 PALM AVE STE A2  
SAN DIEGO, CA 92154

📞 Phone: (619) 297-2020

Fax: (888) 210-5799

🕒 After Hours Phone: (619)  
297-2020

Accepting New Patients: Yes

🗨 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

🕒 Hours: M-F 9:30AM-6PM  
SA 9AM-3PM

### **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

### **LEE, JASON, OD**

Provider Gender: Male

License Number: 14881

NPI: 1679985584

Provider English Spoken: Y

🗨 Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

📍 7910 FROST ST STE 200  
SAN DIEGO, CA 92123

📞 Phone: (858) 309-7702

Fax: (858) 966-8901

🕒 After Hours Phone: (858)  
309-7702

Accepting New Patients: Yes

🗨 Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

♿ Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

🕒 Hours: M-F 7AM-5PM

### **LIN, HENRY, OD**

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y

🗨 Spanish, Chinese

Cultural Competency: Y

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务


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

 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

### LIN, HENRY, OD

Provider Gender: Male

License Number: 11368

NPI: 1861405664

Provider English Spoken: Y


 Spanish, Chinese

Cultural Competency: Y


OPTOM-EYES VISION CARE  
OPTOMETRY

 5638 MISSION CENTER RD  
STE 103

SAN DIEGO, CA 92108


 Phone: (619) 295-2900

Fax: (888) 210-5799

 After Hours Phone: (619)  
295-2900

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender 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


### LLANES, BENJAMIN, OD

Provider Gender: Male

License Number: 8782

NPI: 1053309005

Provider English Spoken: Y


 Spanish, Tagalog

Cultural Competency: Y

SEE KLEER EYECARE CENTER

 9580 BLACK MOUNTAIN  
RD STE J

SAN DIEGO, CA 92126


 Phone: (858) 536-8952

Fax: (858) 536-8951

 After Hours Phone: (858)  
536-8952

Accepting New Patients: Yes

 Site English Spoken: Y

 Site Languages(s) Spoken:  
Spanish, Tagalog

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

 Hours: M-TH 11AM-6PM  
F 1PM-5PM  
SA 9AM-1PM

### MARR, RYAN, OD

Provider Gender: Male

License Number: 35302

NPI: 1235857525

Provider English Spoken: Y

Cultural Competency: Y

WEST COAST EYE CARE

 4344 CONVOY ST STE C2

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

SAN DIEGO, CA 92111  
☎ Phone: (858) 565-8822  
Fax: (858) 565-2449  
🕒 After Hours Phone: (858) 565-8822  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### MARR, RYAN, OD

Provider Gender: Male  
License Number: 35302  
NPI: 1235857525  
Provider English Spoken: Y  
Cultural Competency: Y  
WEST COAST EYE CARE  
📍 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115  
☎ Phone: (619) 697-4600  
Fax: (619) 697-2410  
🕒 After Hours Phone: (619) 697-4600  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1U  
🕒 Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### MCCLEAN, ESMERALDA, OD

Provider Gender: Female  
License Number: 15001  
NPI: 1962817981  
Provider English Spoken: Y  
📄 Spanish  
Cultural Competency: Y  
HILLCREST EYE  
CENTER-UCSD

📍 4060 4TH AVE STE 610  
SAN DIEGO, CA 92103  
☎ Phone: (619) 543-6244  
Fax: (619) 295-5034  
🕒 After Hours Phone: (619) 543-6244  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N  
♿ Accessibility: CONTACT

PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
🕒 Hours: M-F 8AM-4PM

### MCCLEAN, ESMERALDA, OD

Provider Gender: Female  
License Number: 15001  
NPI: 1962817981  
Provider English Spoken: Y  
📄 Spanish  
Cultural Competency: Y  
UC SAN DIEGO HEALTH

📍 16950 VIA TAZON  
SAN DIEGO, CA 92127  
☎ Phone: (858) 534-6290  
Fax: (858) 732-0921  
🕒 After Hours Phone: (858) 534-6290  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction  
American Sign Language (ASL): N

♿ Accessibility: CONTACT PROVIDER  
Public transportation (within 1/2 mile from Site): 1T  
🕒 Hours: M-F 8AM-5PM

### MCGRAW, JOSEPH, MD

Provider Gender: Male  
License Number: A155228  
NPI: 1588624852  
Provider English Spoken: Y

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

*Cultural Competency: Y*  
**WEST COAST EYE CARE**  
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**  
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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

License Number: 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  
 4060 4TH AVE STE 610  
 SAN DIEGO, CA 92103  
 Phone: (619) 543-6244  
 Fax: (619) 295-5034  
 After Hours Phone: (619)

543-6244  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: M-F 8AM-4PM

### MORRISON REYES, JOSHUA, MD

Provider Gender: Male  
 License Number: A125435  
 NPI: 1235366782  
 Provider English Spoken: Y  
 Indonesian, Spanish  
 Cultural Competency: Y  
 WEST COAST EYE CARE

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  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM


### NGUYEN, THANH, OD

Provider Gender: Female  
License Number: 13126  
NPI: 1992813323  
Provider English Spoken: Y


Vietnamese

Cultural Competency: Y

### SABRE SPRINGS OPTOMETRY

 12650 SABRE SPGS PKWY  
STE 203

SAN DIEGO, CA 92128

 Phone: (858) 748-1265

Fax: (844) 269-9527

 After Hours Phone: (858)  
748-1265

Accepting New Patients: Yes

Site English Spoken: Y

Site 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

### NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156

NPI: 1376839019

Provider English Spoken: Y


Vietnamese

Cultural Competency: Y

### SD VISION CARE OPTOMETRY

 3807 FAIRMOUNT AVE STE  
200

SAN DIEGO, CA 92105

 Phone: (619) 508-5678

Fax: (619) 501-0686

 After Hours Phone: (619)  
508-5678

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

### NGUYEN, BRUCE, OD

Provider Gender: Male

License Number: 14156


NPI: 1376839019

Provider English Spoken: Y


Vietnamese

Cultural Competency: Y

### CLAIREMONT OPTOMETRY

 10715 TIERRASANTA BLVD  
STE F

SAN DIEGO, CA 92124

 Phone: (858) 279-6500

Fax: (858) 225-7174

 After Hours Phone: (858)  
279-6500

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

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, KELVIN, OD

Provider Gender: Male

License Number: 11085

NPI: 1518923572

Provider English Spoken: Y


Spanish

Cultural Competency: Y

### SD VISION CARE OPTOMETRY

 3807 FAIRMOUNT AVE STE  
200

SAN DIEGO, CA 92105

 Phone: (619) 508-5678

Fax: (619) 501-0686

 After Hours Phone: (619)  
508-5678

Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

### NGUYEN, JASMINE, OD

Provider Gender: Female

License Number: 11189

NPI: 1497896922

Provider English Spoken: Y

Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

4029 43RD ST STE 300  
SAN DIEGO, CA 92105

Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619) 284-3937

Accepting New Patients: Yes

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

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

### O HALLORAN, HENRY, MD

Provider Gender: Male

License Number: A73282

NPI: 1235287947

Provider English Spoken: Y

German, Spanish

Cultural Competency: Y

RADY CHILDRENS

SPECIALISTS

7910 FROST ST STE 200  
SAN DIEGO, CA 92123

Phone: (858) 309-7702

Fax: (858) 966-8901

After Hours Phone: (858) 309-7702

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL):

N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M-F 7AM-5PM

### PATEL, SARJAN, MD

Provider Gender: Male

License Number: A114976

NPI: 1316199326

Provider English Spoken: Y

Gujarati, Hindi, Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

☎ *After Hours Phone: (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, SARJAN, MD**

*Provider Gender: Male*

*License Number: A114976*

*NPI: 1316199326*

*Provider English Spoken: Y*

☐ *Gujarati, Hindi, Spanish Cultural Competency: Y*

WEST COAST EYE CARE

📍 6945 EL CAJON BLVD  
SAN DIEGO, CA 92115

☎ *Phone: (619) 697-4600*  
*Fax: (619) 697-2410*

☎ *After Hours Phone: (619) 697-4600*

*Accepting New Patients: Yes*

☐ *Site English Spoken: Y*

*Min/Max Age: 0\None*

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

♿ *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

🕒 *Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM*

### **PATEL, GITANE, MD**

*Provider Gender: Male*

*License Number: A108603*

*NPI: 1710171434*

*Provider English Spoken: Y*

*Cultural Competency: Y*

WEST COAST EYE CARE

📍 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*

### **PHAM, TONY, OD**

*Provider Gender: Male*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

License Number: 12348  
 NPI: 1841271434  
 Provider English Spoken: Y  
 Spanish, Vietnamese  
 Cultural Competency: Y  
 MIRA MESA EYECARE  
 6755 MIRA MESA BLVD STE 141  
 SAN DIEGO, CA 92121  
 Phone: (858) 535-8282  
 Fax: (858) 535-0537  
 After Hours Phone: (858) 535-8282  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site 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  
 Vietnamese, Chinese  
 Cultural Competency: Y  
 SCRIPPS RANCH OPTOMETRI

CTR  
 9880 HIBERT ST STE E1  
 SAN DIEGO, CA 92131  
 Phone: (858) 693-9044  
 Fax: (858) 693-0704  
 After Hours Phone: (858) 693-9044  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Vietnamese  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1U  
 Hours: M 10AM-6PM TU 10AM-2PM W-TH 10AM-6PM F 9AM-2PM SA 9AM-2PM


**POUSTI, SHEIVA, OD**  
 Provider Gender: Female  
 License Number: 10403  
 NPI: 1730240052  
 Provider English Spoken: Y  
 Cultural Competency: Y  
 SAN DIEGO EYE CLINIC OPTOMETRY  
 3560 FAIRMOUNT AVE STE A  
 SAN DIEGO, CA 92105  
 Phone: (619) 431-2020

Fax: (619) 376-2100  
 After Hours Phone: (619) 431-2020  
 Accepting New Patients: Yes  
 Site English Spoken: Y  
 Site Languages(s) Spoken: Spanish  
 Min/Max Age: 0\None  
 Gender Restriction: No Gender restriction  
 American Sign Language (ASL): N  
 Accessibility: CONTACT PROVIDER  
 Public transportation (within 1/2 mile from Site): 1T  
 Hours: SU-SA 9AM-6PM

**PRABHU, SUJATA, MD**  
 Provider Gender: Female  
 License Number: A115965  
 NPI: 1982872552  
 Provider English Spoken: Y  
 Spanish  
 Cultural Competency: Y  
 WEST COAST EYE CARE  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

American Sign Language (ASL):  | Hours: M 7:30AM-4:30PM  
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

 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

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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y


Vietnamese

Cultural Competency: Y

JASMINE P NGUYEN OD INC

 4029 43RD ST STE 300

SAN DIEGO, CA 92105

 Phone: (619) 284-3937

Fax: (619) 284-3938

After Hours Phone: (619)  
284-3937

Accepting New Patients: Yes


Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish, Vietnamese


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 9AM-5PM  
SA 9AM-1PM

### TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Spanish


Cultural Competency: Y

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

Spanish


Cultural Competency: Y

FASHION VALLEY EYE CARE

OPTOMETR

 7007 FRIARS RD STE 351

SAN DIEGO, CA 92108

 Phone: (619) 291-2020

Fax: (888) 210-5799

After Hours Phone: (619)  
291-2020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish


Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1T

 Hours: M-F 10AM-7PM  
SA 10AM-7PM

### TAM, MAY, OD

Provider Gender: Female

License Number: 11960

NPI: 1548255896

Provider English Spoken: Y

Spanish


Cultural Competency: Y

OPTOM-EYES VISION CARE

OPTOMETRY

 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








了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。









## J. 眼科提供者名录 - 眼科和视力服务

 **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**

### **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 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM**

### **TONNU, ANH, OD**

Provider Gender: Female  
License Number: 11318  
NPI: 1679521280  
Provider English Spoken: Y  
 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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一  
至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 7:30AM-4:30PM  
TU 8AM-5PM  
W 8:30AM-5PM  
TH 8AM-6PM  
F 8AM-4PM

### TONNU, ANH, OD

Provider Gender: Female

License Number: 11318

NPI: 1679521280

Provider English Spoken: Y

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

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 Language(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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

NPI: 1932280054

Provider English Spoken: Y

Spanish

Cultural Competency: Y

VAN HOOSE OPTOMETRIC CORPORATION

7246 CLAIREMONT MESA BLVD

SAN DIEGO, CA 92111

Phone: (858) 292-7193

Fax: (858) 292-8247

After Hours Phone: (858) 292-7193

Accepting New Patients: Yes

Site English Spoken: Y

Site Language(s) Spoken: Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1T

Hours: M 8AM-5PM  
TU-TH 9AM-6PM  
F 8AM-5PM

### VIVIRITO, MARY, OD

Provider Gender: Female

License Number: 33798

NPI: 1477968667

Provider English Spoken: Y

Spanish

Cultural Competency: Y

WEST COAST EYE CARE

4344 CONVOY ST STE C2  
SAN DIEGO, CA 92111

Phone: (858) 565-8822

Fax: (858) 565-2449

After Hours Phone: (858) 565-8822

Accepting New Patients: Yes

Site English Spoken: Y

Min/Max Age: 0\None

Gender Restriction: No Gender restriction

American Sign Language (ASL): N

Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM

### VO, ANDREW MINH, OD

Provider Gender: Male

License Number: 33869

NPI: 1790291565

Provider English Spoken: Y

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 Language(s) Spoken: Spanish



Min/Max Age: 0\None

Gender Restriction: No Gender restriction




American Sign Language (ASL): N



了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

 *Accessibility: CONTACT PROVIDER*  
*Public transportation (within 1/2 mile from Site): 1U*  
 *Hours: TU-F 9AM-3PM SA 10AM-2PM*

### **YU, CAROL, OD**



*Provider Gender: Female*  
*License Number: 34047*  
*NPI: 1639697451*  
*Provider English Spoken: Y*  
 *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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

*Gender Restriction: No Gender restriction*

*American Sign Language (ASL): N*

 *Accessibility: CONTACT PROVIDER*

*Public transportation (within 1/2 mile from Site): 1U*

 *Hours: M 10AM-6PM  
TU 8:30AM-5PM  
W 7:30AM-4PM  
TH 9:30AM-5PM  
F 8AM-4PM*

### SAN MARCOS

#### **GARFF, KEVIN, MD**

*Provider Gender: Male*

*License Number: A160988*

*NPI: 1609258920*

*Provider English Spoken: Y*


 *Spanish*

*Cultural Competency: Y*

**RSF OPHTHALMOLOGY**

 100 N RANCHO 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*


 *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*


 *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*

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

**RICHARD M SKAY OD**

 1903 W SAN MARCOS  
BLVD STE 130  
SAN MARCOS, CA 92078

 Phone: (760) 727-2211  
Fax: (760) 727-2533

 After Hours Phone: (760)  
727-2211


Accepting New Patients: Yes

Site English Spoken: Y  
Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

 Hours: M-F 9AM-3PM

**TA, MINI, OD**

Provider Gender: Female

License Number: 15170


NPI: 1578955605

Provider English Spoken: Y

Cultural Competency: Y

**NEW OPTIX OPTOMETRY**

 640 GRAND AVE STE 101  
SAN MARCOS, CA 92078

 Phone: (760) 736-0020  
Fax: (760) 736-0019

 After Hours Phone: (760)  
736-0020

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:

Spanish, Vietnamese

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL): 1/2 mile from Site): 1T

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


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

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
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## J. 眼科提供者名录 - 眼科和视力服务

🕒 Hours: M 9AM-5PM  
TU 9AM-6PM  
W 9AM-5PM  
TH 9AM-6PM  
F 9AM-5PM

### SPRING VALLEY

#### FLEMING, JOHN, OD

Provider Gender: Male  
License Number: 8461  
NPI: 1033192133  
Provider English Spoken: Y  
Cultural Competency: Y  
JOHN C FLEMING OD  
📍 9628 CAMPO RD STE C  
SPRING VALLEY, CA 91977  
📞 Phone: (619) 463-9318  
Fax: (619) 463-9640  
🕒 After Hours Phone: (619)  
463-9318  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 9AM-5:30PM  
W-TH 9AM-5PM  
F 9AM-4PM

#### HOANG, KENNY, OD

Provider Gender: Male  
License Number: 35207  
NPI: 1740868603  
Provider English Spoken: Y  
Cultural Competency: Y  
JOHN C FLEMING OD  
📍 9628 CAMPO RD STE C  
SPRING VALLEY, CA 91977  
📞 Phone: (619) 463-9318  
Fax: (619) 463-9640  
🕒 After Hours Phone: (619)  
463-9318  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 9AM-5:30PM  
W-TH 9AM-5PM  
F 9AM-4PM

#### JOHNSON, CHRISTOPHER, OD

Provider Gender: Male  
License Number: 15100  
NPI: 1568861425  
Provider English Spoken: Y  
Cultural Competency: Y  
JOHN C FLEMING OD  
📍 9628 CAMPO RD STE C

SPRING VALLEY, CA 91977

📞 Phone: (619) 463-9318  
Fax: (619) 463-9640  
🕒 After Hours Phone: (619)  
463-9318  
Accepting New Patients: Yes  
📄 Site English Spoken: Y  
Min/Max Age: 0\None  
Gender Restriction: No Gender  
restriction  
American Sign Language (ASL):  
N  
♿ Accessibility: CONTACT  
PROVIDER  
Public transportation (within  
1/2 mile from Site): 1U  
🕒 Hours: M 9AM-5PM  
TU 9AM-5:30PM  
W-TH 9AM-5PM  
F 9AM-4PM

#### KALRA, ANKUR, OD

Provider Gender: Male  
License Number: 11898  
NPI: 1124195789  
Provider English Spoken: Y  
📄 Hindi  
Cultural Competency: Y  
EYE CARE OPTOMETRY  
ASSOCIATES  
📍 687 SWEETWATER RD  
SPRING VALLEY, CA 91977  
📞 Phone: (619) 466-9444  
Fax: (619) 466-9314  
🕒 After Hours Phone: (619)  
466-9444  
Accepting New Patients: Yes

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：  
blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

<input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM	American Sign Language (ASL): <input type="clock"/>   Hours: M-F 9AM-6PM SA 9AM-5PM <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM	<b>NGUYEN, THERESA, OD</b> Provider Gender: Female License Number: 35530TLG NPI: 1609555713 Provider English Spoken: Y Cultural Competency: Y EYE CARE OPTOMETRY ASSOCIATES <input type="map"/> 687 SWEETWATER RD SPRING VALLEY, CA 91977 <input type="phone"/> Phone: (619) 466-9444 Fax: (619) 466-9314 <input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM
<b>KEDDINGTON, JOAN, OD</b> Provider Gender: Female License Number: 6263 NPI: 1992872691 Provider English Spoken: Y <input type="checkbox"/> Spanish Cultural Competency: Y EYE CARE OPTOMETRY ASSOCIATES <input type="map"/> 687 SWEETWATER RD SPRING VALLEY, CA 91977 <input type="phone"/> Phone: (619) 466-9444 Fax: (619) 466-9314 <input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction	<b>KING, MARY, OD</b> Provider Gender: Female License Number: 13711 NPI: 1578792107 Provider English Spoken: Y <input type="checkbox"/> Spanish Cultural Competency: Y EYE CARE OPTOMETRY ASSOCIATES <input type="map"/> 687 SWEETWATER RD SPRING VALLEY, CA 91977 <input type="phone"/> Phone: (619) 466-9444 Fax: (619) 466-9314 <input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U	<input type="map"/> 687 SWEETWATER RD SPRING VALLEY, CA 91977 <input type="phone"/> Phone: (619) 466-9444 Fax: (619) 466-9314 <input type="clock"/> After Hours Phone: (619) 466-9444 Accepting New Patients: Yes <input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U <input type="clock"/> Hours: M-F 9AM-6PM SA 9AM-5PM
<input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction	<input type="checkbox"/> Site English Spoken: Y <input type="checkbox"/> Site Languages(s) Spoken: Spanish Min/Max Age: 0\None Gender Restriction: No Gender restriction American Sign Language (ASL): N <input type="checkbox"/> Accessibility: CONTACT PROVIDER Public transportation (within 1/2 mile from Site): 1U	<b>SOLIS, KEVIN, OD</b> Provider Gender: Male License Number: 10420 NPI: 1538362116

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## J. 眼科提供者名录 - 眼科和视力服务

Provider English Spoken: Y

Cultural Competency: Y

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

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

Spanish

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

29115 VALLEY CENTER RD  
STE E  
VALLEY CENTER, CA 92082

Phone: (760) 751-8771

Fax: (760) 751-8772

After Hours Phone: (760)  
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

American Sign Language (ASL):  
N

Accessibility: CONTACT  
PROVIDER

Public transportation (within  
1/2 mile from Site): 1U

Hours: M 9AM-6PM  
TU-F 9AM-5PM

### LE, TAM, OD

Provider Gender: Female

License Number: 12951

NPI: 1235268707

Provider English Spoken: Y

Spanish, Vietnamese

Cultural Competency: Y

VALLEY CENTER OPTOMETRY

29115 VALLEY CENTER RD  
STE E  
VALLEY CENTER, CA 92082

Phone: (760) 751-8771

Fax: (760) 751-8772

After Hours Phone: (760)  
751-8771

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None

Gender Restriction: No Gender  
restriction

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


## J. 眼科提供者名录 - 眼科和视力服务

American Sign Language (ASL): 1/2 mile from Site): 1T

N

 Accessibility: CONTACT PROVIDER

Public transportation (within 1/2 mile from Site): 1U

 Hours: M 9AM-6PM  
TU-F 9AM-5PM

### VISTA

#### DEMLINGER, GLENN, OD

Provider Gender: Male

License Number: 8954

NPI: 1508932518

Provider English Spoken: Y


Spanish

Cultural Competency: Y

SHADOWRIDGE FAMILY

VISION

 741 SHADOWRIDGE DR  
VISTA, CA 92083

 Phone: (760) 727-1844

Fax: (760) 727-3044

 After Hours Phone: (760)  
727-1844

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


Gender Restriction: No Gender  
restriction

American Sign Language (ASL):

N

 Accessibility: CONTACT PROVIDER

Public transportation (within

 Hours: M-TU 9AM-6PM  
W 7AM-5PM  
TH 9AM-6PM

#### GEORGE, BRUCE, OD

Provider Gender: Male

License Number: 7696

NPI: 1356414551


Provider English Spoken: Y

Korean, Spanish

Cultural Competency: Y

BRUCE D GEORGE OD

 931 ANZA AVE STE B  
VISTA, CA 92084

 Phone: (760) 758-2340

Fax: (760) 867-2222

 After Hours Phone: (760)  
758-2340

Accepting New Patients: Yes

Site English Spoken: Y

Site Languages(s) Spoken:  
Spanish

Min/Max Age: 0\None


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, KENDALL, OD

Provider Gender: Male

License Number: 34270


NPI: 1619529948


Provider English Spoken: Y

Spanish


Cultural Competency: Y

BRUCE D GEORGE OD

 931 ANZA AVE STE B  
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

Vietnamese

Cultural Competency: Y

KINDERSPECS-GOOD EYES


了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## J. 眼科提供者名录 - 眼科和视力服务

---

### 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): IT

 Hours: M-TH 10AM-5PM

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

ECM 重点群体 (POF) 表

ECM 重点群体 (POF)			成人	儿童及青少年
	1	无家可归者	✓	✓
	2	面临可避免的医院或 ED 使用风险者（正式称为“高使用者”）	✓	✓
	3	有严重心理健康和/或药物滥用障碍需求者	✓	✓
	4	从监禁中过渡者	✓	✓
	5	生活在社区中且面临长期护理机构收容风险的成年人	✓	
	6	过渡到社区的成人护理机构居民	✓	
	7	加入加州儿童服务 (CCS) 或 CCS 全儿童模式 (WCM) 的儿童及青少年，除了 CCS 条件外还有其他需求		✓
	8	参与儿童福利的儿童及青少年		✓
	9	出生公平性重点人群	✓	✓



## K. 其他服务提供者（社区支持、强化护理管理）

### 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

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

### CULVER CITY

#### MEDZED PHYSICIAN SERVICES INC

300 CORPORATE POINTE  
STE 465  
CULVER CITY, CA 90230

#### 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

\*成人 \*\*儿童 \*\*\*成人和儿童

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街头医学 (Street Medicine) 或街头健康是为无家可归的人提供医疗保健的做法

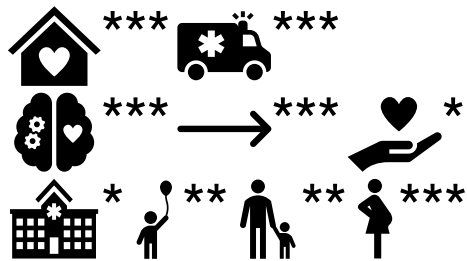
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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

### 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:

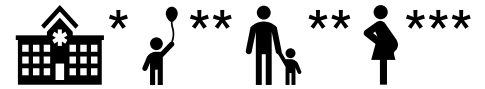
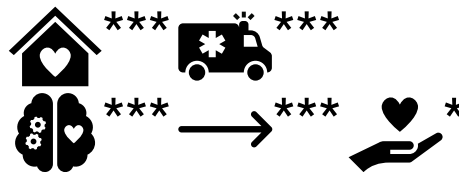


Community Supports Services:  
N/A  
Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:  
ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and  
Existing Patients: (619)  
510-4641

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

\*成人 \*\*儿童 \*\*\*成人和儿童





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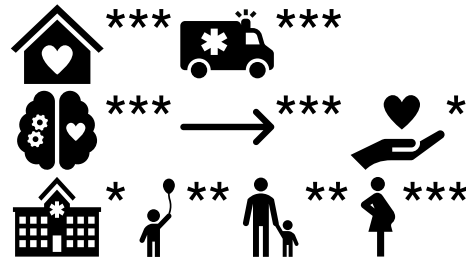
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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

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

 Website: N/A  
 ECM Population of Focus:





Community Supports Services: N/A  
 Street Medicine Provider: N  
 Email for New Referrals and Existing Patients: [referrals@sdsdwellnesscollaborative.org](mailto:referrals@sdsdwellnesscollaborative.org)  
 Phone for New Referrals and Existing Patients: (619) 273-3295

Mailing Address: 1084 N EL CAMINO REAL STE B-149; Encinitas; CA; 92024  
 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 Agency and Sustaining Services, Housing Transition Navigation Services  
 Street Medicine Provider: N  
 Phone for New Referrals and Existing Patients: (310) 280-5203

#### TITANIUM HEALTHCARE

 500 LA TERRAZA BLVD STE 150  
 ESCONDIDO, CA 92025  
 Phone: (310) 280-5203  
 After Hours Phone: (310) 280-5203

### 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

\*成人 \*\*儿童 \*\*\*成人和儿童

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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

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

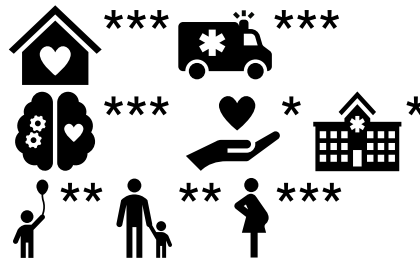
 *Phone: (619) 429-3733*

 *After Hours Phone: (619) 429-3733*

 **Accessibility: CONTACT PROVIDER**

 **Website: N/A**

*ECM Population of Focus:*



*Community Supports Services: N/A*

*Street Medicine Provider: N  
Email for New Referrals and Existing Patients:*


*tsadlowski@ibclinic.org*


*Phone for New Referrals and Existing Patients: (619) 429-3733*

### 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:*



\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## K. 其他服务提供者（社区支持、强化护理管理）



Community Supports Services:  
N/A

Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:

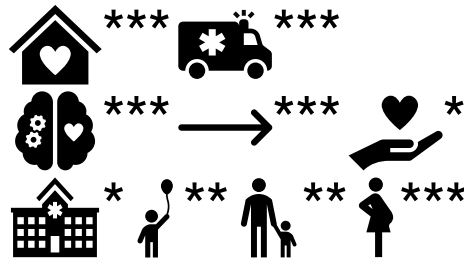
ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and  
Existing Patients: (619)  
510-4641

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct  
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider  
Services-Pre-Release Services  
and Participating in Warm  
Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

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)

\*成人 \*\*儿童 \*\*\*成人和儿童

†ECM 和社区支持需要事先授权，并且仅限于符合特定资格的会员。

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时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：


blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。


## K. 其他服务提供者（社区支持、强化护理管理）

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](mailto: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

 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

 Accessibility: CONTACT  
PROVIDER


 Website: N/A


Community Supports Services:  
Housing Deposits, Housing  
Tenancy and Sustaining  
Services, Housing Transition  
Navigation Services

Street Medicine Provider: N  
Phone for New Referrals and  
Existing Patients: (323)  
276-6471

### EXODUS RECOVERY INC

 8401 S VERMONT AVE  
LOS ANGELES, CA 90044

 Phone: (323) 789-6492

 After Hours Phone: (323)  
789-6492

 Accessibility: CONTACT  
PROVIDER


 Website: N/A

Community Supports Services:  
Housing Deposits, Housing  
Tenancy and Sustaining  
Services, Housing Transition  
Navigation Services

Street Medicine Provider: N  
Phone for New Referrals and  
Existing Patients: (323)  
789-6492

### EXODUS RECOVERY INC

 8401 S VERMONT AVE  
LOS ANGELES, CA 90044

 Phone: (323) 789-6492

 After Hours Phone: (323)

\*成人 \*\*儿童 \*\*\*成人和儿童

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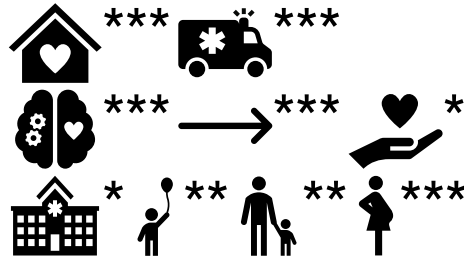
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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

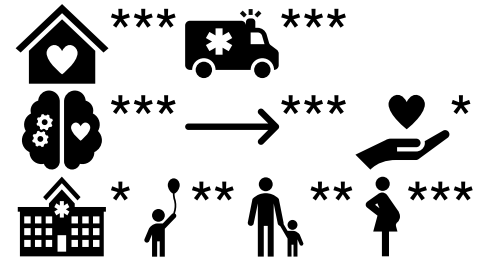
789-6492  
 789-6492  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
 Community Supports Services:  
 Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services  
 Street Medicine Provider: N  
 Phone for New Referrals and Existing Patients: (323) 789-6492



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)

### 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:

\*成人 \*\*儿童 \*\*\*成人和儿童

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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

510-4641

Mailing Address: 4060

FAIRMOUNT AVE;SAN

DIEGO;CA;92105

Jl ECM Provider Billing- Direct

Contract with Correctional

Facilities;Jl ECM Provider

Billing- FFS (PAVE Enrollment)

Jl ECM Provider

Services-Pre-Release Services

and Participating in Warm

Handoffs

### 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:

\*成人 \*\*儿童 \*\*\*成人和儿童

†ECM 和社区支持需要事先授权，并且仅限于符合特定资格的会员。

街头医学 (Street Medicine) 或街头健康是为无家可归的人提供医疗保健的做法

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise Customer Care 部门，工作  
时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## K. 其他服务提供者（社区支持、强化护理管理）



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and  
Existing Patients:

[network@fullcirclehn.org](mailto: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

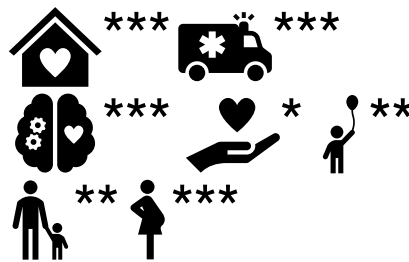
After Hours Phone: (619)  
507-9333

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](mailto: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

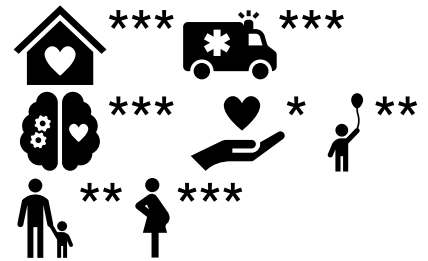
After Hours Phone: (619)  
507-9333

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

\*成人 \*\*儿童 \*\*\*成人和儿童

†ECM 和社区支持需要事先授权，并且仅限于符合特定资格的会员。

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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：

[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

*Email for New Referrals and Existing Patients:*

*mhammel@comresearch.org*

*Phone for New Referrals and Existing Patients: (619) 507-9333*

### HEALTHY CONNECT SAN DIEGO

*3570 CAMINO DEL RIO N SAN DIEGO, CA 92108*

*Phone: (619) 507-9333*

*After Hours Phone: (619) 507-9333*

*Accessibility: CONTACT PROVIDER*

*Website: N/A*

*ECM Population of Focus:*



*Community Supports Services:*

*N/A*

*Street Medicine Provider: N*

*Email for New Referrals and Existing Patients:*

*mhammel@comresearch.org*

*Phone for New Referrals and Existing Patients: (619) 507-9333*

### 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*

### LA MAESTRA

### COMMUNITY HEALTH

### CENTERS

*4060 FAIRMOUNT AVE SAN DIEGO, CA 92105*

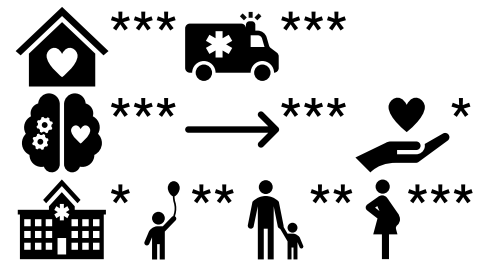
*Phone: (619) 510-4641*

*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*

\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct  
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider  
Services-Pre-Release Services  
and Participating in Warm  
Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

 4060 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 510-4641  
 After Hours Phone: (619)  
510-4641  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A

ECM Population of Focus:



Community Supports Services:  
Asthma Remediation,Housing  
Deposits,Housing Tenancy and  
Sustaining Services,Housing  
Transition Navigation Services  
Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:

ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and  
Existing Patients: (619)  
510-4641

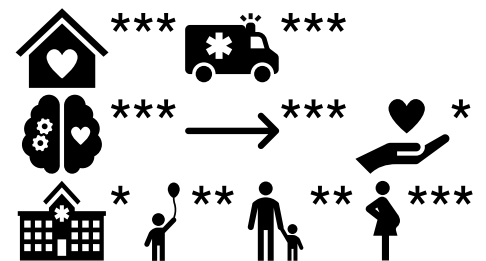
Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct  
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider  
Services-Pre-Release Services  
and Participating in Warm  
Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

 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

\*成人 \*\*儿童 \*\*\*成人和儿童

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## K. 其他服务提供者（社区支持、强化护理管理）

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct  
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider  
Services-Pre-Release Services  
and Participating in Warm  
Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

 4074 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 510-4641  
 After Hours Phone: (619)  
510-4641  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A

ECM Population of Focus:






Community Supports Services:  
N/A

Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:  
ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and  
Existing Patients: (619)  
510-4641

Mailing Address: 4060  
FAIRMOUNT AVE;SAN  
DIEGO;CA;92105

JI ECM Provider Billing- Direct  
Contract with Correctional  
Facilities;JI ECM Provider  
Billing- FFS (PAVE Enrollment)  
JI ECM Provider  
Services-Pre-Release Services  
and Participating in Warm  
Handoffs

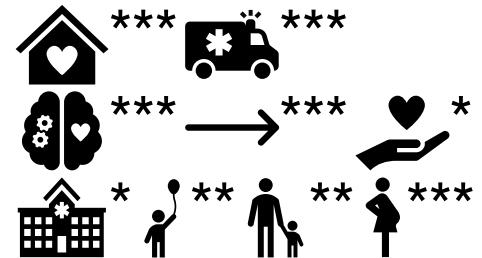
### LA MAESTRA COMMUNITY HEALTH CENTERS

 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

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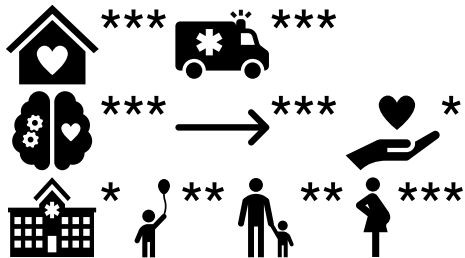


## K. 其他服务提供者（社区支持、强化护理管理）

*JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### 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:





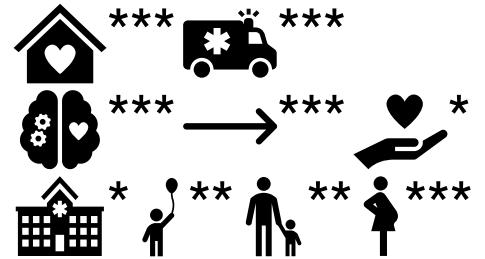
*Community Supports Services: N/A  
Street Medicine Provider: N  
Email for New Referrals and Existing Patients:  
ECM.CS@LAMAESTRA.ORG  
Phone for New Referrals and Existing Patients: (619) 510-4641  
Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105*

*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*

### 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*

\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

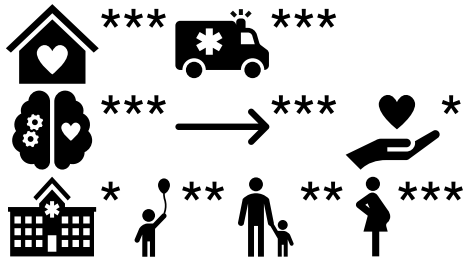
*Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

### FAMILY HEALTH

#### CENTERS OF SAN DIEGO

 823 GATEWAY CENTER WAY  
SAN DIEGO, CA 92102  
 Phone: (619) 876-4450  
 After Hours Phone: (619) 876-4450  
 Accessibility: CONTACT PROVIDER  
 Website: N/A

ECM Population of Focus:



Community Supports Services:

*Housing Deposits,Housing Tenancy and Sustaining Services,Housing Transition Navigation Services Street Medicine Provider: N Email for New Referrals and Existing Patients: CalAIMReferrals@fhcsd.org Phone for New Referrals and Existing Patients: (619) 876-4450*






*Mailing Address: 823 GATEWAY CENTER WAY;SAN DIEGO;CA;92102 JI ECM Provider Billing- Direct Contract with Correctional Facilities;JI ECM Provider Billing- FFS (PAVE Enrollment) JI ECM Provider Services-Pre-Release Services and Participating in Warm Handoffs*

#### FATHER JOES VILLAGES

 16 15TH ST  
SAN DIEGO, CA 92101  
 Phone: (619) 645-6405  
 After Hours Phone: (619)

645-6405  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
*Community Supports Services: Recuperative Care (Medical Respite) Street Medicine Provider: N Phone for New Referrals and Existing Patients: (619) 645-6405*

#### 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*

\*成人 \*\*儿童 \*\*\*成人和儿童

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## K. 其他服务提供者（社区支持、强化护理管理）

Street Medicine Provider: N  
 Email for New Referrals and Existing Patients:  
 ecm@211sandiego.org  
 Phone for New Referrals and Existing Patients: (858) 380-5750

### 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





### 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



### PEOPLE ASSISTING THE

### HOMELESS

 1250 SIXTH AVE  
 SAN DIEGO, CA 92101  
 Phone: (619) 810-8668  
 After Hours Phone: (619) 810-8668  
 Accessibility: CONTACT PROVIDER  
 Website: N/A

Community Supports Services: Housing Deposits, Housing Tenancy and Sustaining Services, Housing Transition Navigation Services, Recuperative Care (Medical Respite), Short-Term Post-Hospitalization Housing  
 Street Medicine Provider: N  
 Phone for New Referrals and Existing Patients: (619) 810-8668

### SAN DIEGO FAMILY CARE

 6973 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 279-0925  
 After Hours Phone: (858) 279-0925  
 Accessibility: CONTACT

\*成人 \*\*儿童 \*\*\*成人和儿童


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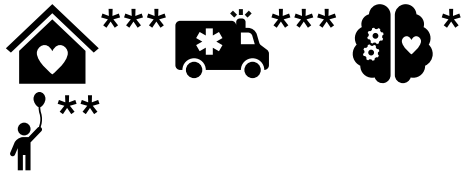
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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

**PROVIDER**  
 Website: N/A  
 ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N  
 Phone for New Referrals and Existing Patients: (858) 279-0925






### SAN DIEGO FAMILY CARE

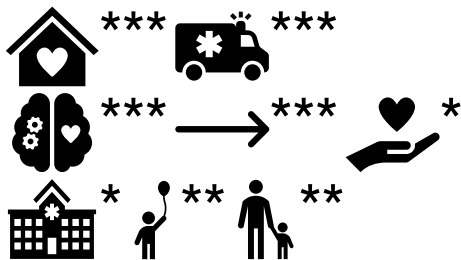
 7011 LINDA VISTA RD  
 SAN DIEGO, CA 92111  
 Phone: (858) 810-8700  
 After Hours Phone: (858) 810-8700  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
 ECM Population of Focus:



Community Supports Services:  
N/A  
 Street Medicine Provider: N  
 Phone for New Referrals and Existing Patients: (858) 810-8700

### 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](mailto:andrea@serenehealth.com)  
 Phone for New Referrals and Existing Patients: (619) 354-1409

Mailing Address: 4849  
 RONSON CT STE 207; SAN DIEGO; CA; 92111

J1 ECM Provider Billing- FFS (PAVE Enrollment)  
 J1 ECM Provider Services-Warm Handoffs Only

### SERENE HEALTH

 3625 RUFFIN RD STE 206  
 SAN DIEGO, CA 92123  
 Phone: (619) 354-1409  
 After Hours Phone: (619) 354-1409  
 Accessibility: CONTACT PROVIDER  
 Website: N/A  
 ECM Population of Focus:



\*成人 \*\*儿童 \*\*\*成人和儿童

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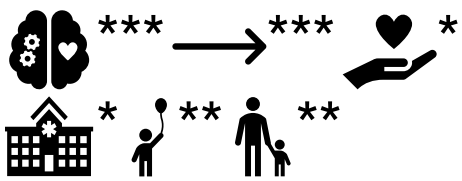
了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise Customer Care 部门，工作

时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD: 711。在线访问，网址：

[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。



## K. 其他服务提供者（社区支持、强化护理管理）



Community Supports Services:  
N/A

Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:

[andrea@serenehealth.com](mailto:andrea@serenehealth.com)  
Phone for New Referrals and  
Existing Patients: (619)  
354-1409

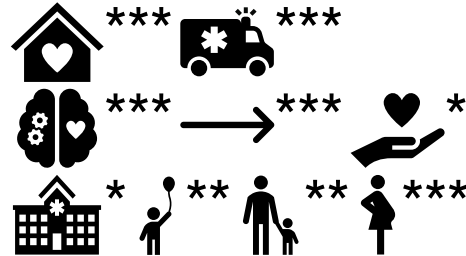
Mailing Address: 4849  
RONSON CT STE 207;SAN  
DIEGO;CA;92111  
JI ECM Provider Billing- FFS  
(PAVE Enrollment)  
JI ECM Provider  
Services-Warm Handoffs Only

### 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](mailto: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

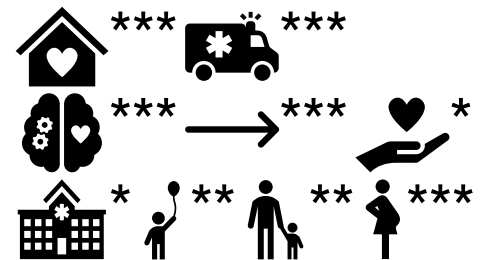
### LA MAESTRA COMMUNITY HEALTH CENTERS

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

\*成人 \*\*儿童 \*\*\*成人和儿童

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## K. 其他服务提供者（社区支持、强化护理管理）

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

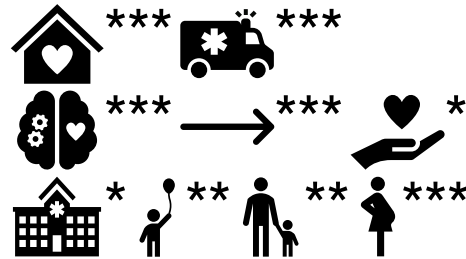
Mailing Address: 4060 FAIRMOUNT AVE;SAN DIEGO;CA;92105

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

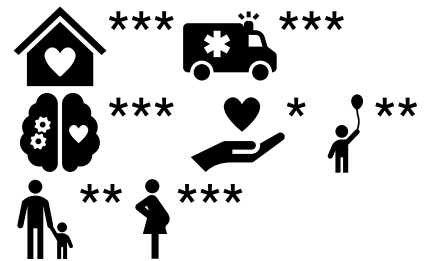
### HEALTHY CONNECT SAN DIEGO

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

\*成人 \*\*儿童 \*\*\*成人和儿童

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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

Phone for New Referrals and Existing Patients: (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: N/A

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

429-3733  
Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services: N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

[tsadlowski@ibclinic.org](mailto:tsadlowski@ibclinic.org)

Phone for New Referrals and Existing Patients: (619) 429-3733

637-3221  
Accessibility: CONTACT PROVIDER

Website: N/A

ECM Population of Focus:



Community Supports Services:

Housing Deposits, Housing

Tenancy and Sustaining

Services, Housing Transition

Navigation

Services, Medically-Supportive

Food/Meals/Medically

Tailored Meals

Street Medicine Provider: N

Email for New Referrals and

Existing Patients:

[calaim@jfssd.org](mailto:calaim@jfssd.org)

Phone for New Referrals and

Existing Patients: (858)

637-3221

### JEWISH FAMILY SERVICE OF SAN DIEGO

### IMPERIAL BEACH HEALTH CENTER

1016 OUTER RD  
SAN DIEGO, CA 92154  
Phone: (619) 429-3733  
After Hours Phone: (619)

### JEWISH FAMILY SERVICE OF SAN DIEGO

8804 BALBOA AVE  
SAN DIEGO, CA 92123  
Phone: (858) 637-3221  
After Hours Phone: (858)

\*成人 \*\*儿童 \*\*\*成人和儿童






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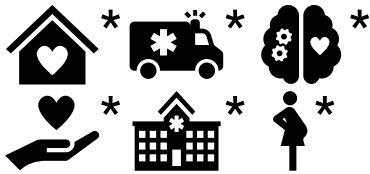
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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）





 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:

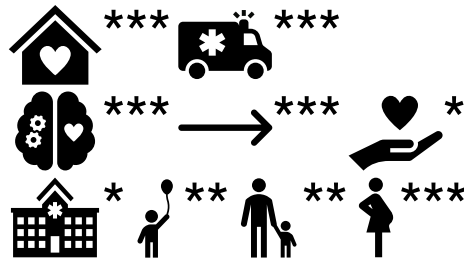


Community Supports Services:  
Housing Deposits, Housing  
Tenancy and Sustaining  
Services, Housing Transition  
Navigation  
Services, Medically-Supportive  
Food/Meals/Medically  
Tailored Meals  
Street Medicine Provider: N  
Email for New Referrals and  
Existing Patients:  
calaim@jfssd.org  
Phone for New Referrals and  
Existing Patients: (858)

637-3221

### 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

Jl ECM Provider Billing- Direct  
Contract with Correctional  
Facilities; Jl ECM Provider  
Billing- FFS (PAVE Enrollment)  
Jl ECM Provider  
Services-Pre-Release Services  
and Participating in Warm  
Handoffs

### LA MAESTRA COMMUNITY HEALTH CENTERS

 4187 FAIRMOUNT AVE  
SAN DIEGO, CA 92105  
 Phone: (619) 510-4641  
 After Hours Phone: (619)  
510-4641  
 Accessibility: CONTACT  
PROVIDER  
 Website: N/A  
ECM Population of Focus:



\*成人 \*\*儿童 \*\*\*成人和儿童

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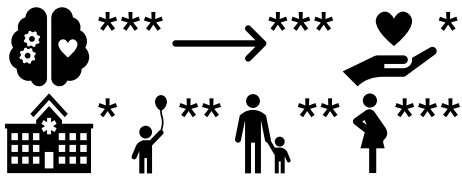
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blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。



## K. 其他服务提供者（社区支持、强化护理管理）



**Community Supports Services:**  
N/A

**Street Medicine Provider:** N

**Email for New Referrals and Existing Patients:**

[ECM.CS@LAMAESTRA.ORG](mailto: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**

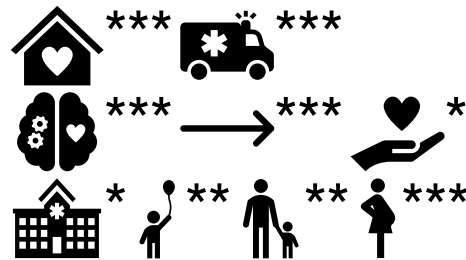
### COMMUNITY HEALTH CENTERS

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](mailto: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*

### LIGHTBRIDGE HOSPICE LLC

6155 CORNERSTONE CT E  
STE 220  
SAN DIEGO, CA 92121

**Phone:** (858) 458-2992  
 **After Hours Phone:** (858) 458-2992

**Site Language(s) Spoken:**  
Spanish, Tagalog

**Hours:** M-F 8AM-5PM

**Accessibility:** CONTACT PROVIDER

**Website:** [www.LIGHTBRIDGEHOSPICE.com](http://www.LIGHTBRIDGEHOSPICE.com)

**ECM Population of Focus:**



\*成人 \*\*儿童 \*\*\*成人和儿童

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[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

*Community Supports Services:* Housing Tenancy and Sustaining Services, Housing Transition Navigation  
*N/A*  
*Street Medicine Provider:* N  
*Email for New Referrals and Existing Patients:* Services, Personal Care and Homemaker Services, Respite  
**JILL@LIGHTBRIDGEHOSPICE.COM**  
*Phone for New Referrals and Existing Patients:* (858) 458-2992



*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 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:*

**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:*



### 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

\*成人 \*\*儿童 \*\*\*成人和儿童

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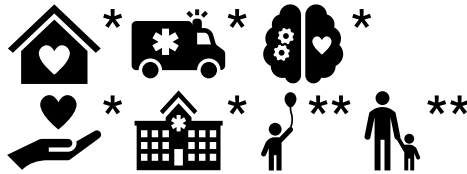
时间：周一至周五上午 8：00 至下午 6：00。TTY/TDD：711。在线访问，网址：

blueshieldca.com/promise/medi-cal。此医疗服务提供者目录中的信息可能会发生变化。

## K. 其他服务提供者（社区支持、强化护理管理）

 Website: N/A

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

[deborah.bowyer@merakey.org](mailto:deborah.bowyer@merakey.org)


Phone for New Referrals and Existing Patients: (916) 832-4868


### AMERICARE ADULT DAY HEALTH CARE CENTER

License Number: 060000832

 340 RANCHEROS DR STE 196

SAN MARCOS, CA 92069

 Phone: (760) 682-2424

 After Hours Phone: (760) 682-2424

 Site English Spoken: Y

 Accessibility: CONTACT

### PROVIDER

 Website: [www.americareadhc.com](http://www.americareadhc.com)

Cultural Competency: N

Accepting New Patients: No

ECM Population of Focus:



Community Supports Services:  
N/A

Street Medicine Provider: N

Email for New Referrals and Existing Patients:

[inashtut@americareadhc.com](mailto:inashtut@americareadhc.com)

Phone for New Referrals and Existing Patients: (760) 682-2424

### 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

\*成人 \*\*儿童 \*\*\*成人和儿童

†ECM 和社区支持需要事先授权，并且仅限于符合特定资格的会员。





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## K. 其他服务提供者（社区支持、强化护理管理）

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-  Phone: (760) 631-5000
-  After Hours Phone: (760) 631-5000
-  Accessibility: CONTACT PROVIDER
-  Website: N/A

ECM Population of Focus:



Community Supports Services:

N/A

Street Medicine Provider: N

Email for New Referrals and

Existing Patients:

[ecmteam@vcc.org](mailto:ecmteam@vcc.org)

Phone for New Referrals and

Existing Patients: (760)

631-5000

\*成人 \*\*儿童 \*\*\*成人和儿童

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时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：

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# L. Blue Shield Promise 紧急护理设施

## CHULA VISTA

### AFC URGENT CARE OF BONITA

NPI: 1316225147

760 OTAY LAKES RD  
CHULA VISTA, CA 91910

(619) 821-2300

(619) 821-2300

Spanish

SU 8AM-5PM  
M-F 8AM-8PM  
SA 8AM-8PM

Accessibility: CONTACT PROVIDER

[www.afcurgentcare.com/chula-vista/](http://www.afcurgentcare.com/chula-vista/)

Accepting New Patients: No

SA 8AM-6PM

Accessibility: CONTACT PROVIDER

<https://www.afcurgentcare.com/san-diego/>

Accepting New Patients: No

### 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

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

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: 1558788620

8260 MIRA MESA BLVD  
STE A

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


# L. Blue Shield Promise 紧急护理设施

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  
 (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

## AFC URGENT CARE OF SAN DIEGO




*NPI: 1952995466*  
 8590 RIO SAN DIEGO DR  
STE 111  
SAN DIEGO, CA 92108  
 (619) 736-4600

 (619) 736-4600  
 SU-SA 8AM-8PM  
 *Accessibility: CONTACT PROVIDER*  
 <https://www.afcurgentcare.com/san-diego/>  
Accepting New Patients: No

## AFC URGENT CARE OF SAN DIEGO




*NPI: 1558788620*  
 8590 RIO SAN DIEGO DR  
STE 111  
SAN DIEGO, CA 92108  
 (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*  
 1740 ROSECRANS ST  
SAN DIEGO, CA 92106  
 (619) 790-7800  
 (619) 790-7800

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](https://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


# L. Blue Shield Promise 紧急护理设施


 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


## 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


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 N/A  
Accepting New Patients: No

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SA 1PM-10PM  
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Accepting New Patients: No







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了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。


# L. Blue Shield Promise 紧急护理设施


## **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNFTN**

*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 FNFTN**


*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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CHULA VISTA, CA 91910

 (858) 966-1720

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 SU 1PM-10PM  
M-F 4PM-10PM  
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 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


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 386 E H ST STE 202  
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 (858) 966-1720

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 SU 1PM-10PM  
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SA 1PM-10PM

 *Accessibility:* CONTACT PROVIDER


 N/A


Accepting New Patients: No


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 (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 FNFTN**

*NPI:* 1669617197

 386 E H ST STE 202  
CHULA VISTA, CA 91910



 (858) 966-1720

 (858) 966-1720







 SU 1PM-10PM

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# L. Blue Shield Promise 紧急护理设施





M-F 4PM-10PM  
SA 1PM-10PM  
 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

## **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDDN**







*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  
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 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

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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  
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 *Accessibility:* CONTACT PROVIDER  
 N/A  
Accepting New Patients: No

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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

## **ESCONDIDO**

**RADY CHILDRENS  
SPECIALISTS SAN DIEGO MED  
FNDDN**  
*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 FNDDN**







*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  
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FNDDN**  
*NPI:* 1669617197







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## L. Blue Shield Promise 紧急护理设施







 2125 CITRACADO PKWY  
STE 100  
ESCONDIDO, CA 92029  
 (760) 755-7600  
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 M-F 8AM-5PM  
 *Accessibility:* CONTACT  
PROVIDER  
 N/A  
Accepting New Patients: No

### **RADY CHILDRENS SPECIALISTS SAN DIEGO MED FNDTN**







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## L. Blue Shield Promise 紧急护理设施







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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  
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**RADY CHILDRENS  
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## L. Blue Shield Promise 紧急护理设施







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# L. Blue Shield Promise 紧急护理设施







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## **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  
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# L. Blue Shield Promise 紧急护理设施


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LA MESA, CA 91942

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## **RADY CHILDRENS**


### **SPECIALISTS SAN DIEGO MED**

## **FNDTN**

*NPI:* 1669617197

 5565 GROSSMONT  
CENTER DR STE 2  
LA MESA, CA 91942

 (619) 713-5375

 (619) 713-5375

 *Accessibility:* CONTACT  
PROVIDER

 N/A


Accepting New Patients: No


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## L. Blue Shield Promise 紧急护理设施


CENTER DR STE 2  
LA MESA, CA 91942  
 (619) 713-5375  
 (619) 713-5375  
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 N/A  
Accepting New Patients: No





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## **OCEANSIDE**

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## SAN DIEGO





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 4305 UNIVERSITY AVE STE





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## L. Blue Shield Promise 紧急护理设施


150  
SAN DIEGO, CA 92105  
 (619) 280-2905  
 (619) 280-2905  
 *Accessibility: CONTACT PROVIDER*  
 N/A  
Accepting New Patients: No


**RADY CHILDRENS  
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*NPI: 1669617197*  
 4305 UNIVERSITY AVE STE  
150  
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 (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**

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#### **FNDTN**

*NPI:* 1669617197

了解最新信息，请致电 1-855-699-5557 联系 Blue Shield Promise 客户服务部门，工作时间：周一至周五上午 8:00 至下午 6:00。TTY/TDD：711。在线访问，网址：[blueshieldca.com/promise/medi-cal](http://blueshieldca.com/promise/medi-cal)。此医疗服务提供者目录中的信息可能会发生变化。

# L. Blue Shield Promise 紧急护理设施





 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  
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*NPI:* 1669617197

 4305 UNIVERSITY AVE STE





150  
 SAN DIEGO, CA 92105  
 (619) 280-2905  
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 4305 UNIVERSITY AVE STE 150  
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 4305 UNIVERSITY AVE STE  
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 (619) 280-2905  
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 N/A  
Accepting New Patients: No


**RADY CHILDRENS  
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*NPI: 1669617197*

 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 (858) 966-8800  
 (858) 966-8800  
 *Accessibility: CONTACT PROVIDER*  
 N/A


Accepting New Patients: No





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N/A

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 3020 CHILDRENS WAY  
SAN DIEGO, CA 92123

 (858) 966-8800

 (858) 966-8800

 *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

SAN DIEGO, CA 92154

 (619) 591-9999

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## L. Blue Shield Promise 紧急护理设施

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-  (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

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